

## INVENTOR SEARCH

=> fil capl; d que l22; fil medl; d que l43; fil embase; d que l65; fil wpix; d que l88; dup rem l43,l22,l88,l65  
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L1 1 SEA FILE=CAPLUS ABB=ON US2006-567406/AP  
 L2 608 SEA FILE=CAPLUS ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
 L3 1134 SEA FILE=CAPLUS ABB=ON HANSEN C?/AU  
 L4 1 SEA FILE=CAPLUS ABB=ON COPENHAGEN H?/AU  
 L5 471 SEA FILE=CAPLUS ABB=ON NILSSON H?/AU  
 L7 1 SEA FILE=REGISTRY ABB=ON 304853-26-7  
 L8 75 SEA FILE=CAPLUS ABB=ON L7/D  
 L21 5 SEA FILE=CAPLUS ABB=ON (L2 OR L3 OR L4 OR L5) AND L8  
 L22 5 SEA FILE=CAPLUS ABB=ON (L1 OR L21)

FILE 'MEDLINE' ENTERED AT 14:49:01 ON 20 SEP 2007

FILE LAST UPDATED: 19 Sep 2007 (20070919/UP). FILE COVERS 1950 TO DATE.

This file contains CAS Registry Numbers for easy and accurate substance identification.

L24 471 SEA FILE=MEDLINE ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
 L25 845 SEA FILE=MEDLINE ABB=ON HANSEN C?/AU  
 L26 300 SEA FILE=MEDLINE ABB=ON COPENHAGEN H?/AU OR NILSSON H?/AU  
 L28 2304 SEA FILE=MEDLINE ABB=ON GHRELIN  
 L43 9 SEA FILE=MEDLINE ABB=ON (L24 OR L25 OR L26) AND L28

FILE 'EMBASE' ENTERED AT 14:49:02 ON 20 SEP 2007  
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FILE COVERS 1974 TO 20 Sep 2007 (20070920/ED)

EMBASE is now updated daily. SDI frequency remains weekly (default) and biweekly.

This file contains CAS Registry Numbers for easy and accurate substance identification.

L60 2434 SEA FILE=EMBASE ABB=ON GHRELIN/CT  
 L61 7 SEA FILE=EMBASE ABB=ON GHRELIN DERIVATIVE/CT  
 L62 410 SEA FILE=EMBASE ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
 L63 638 SEA FILE=EMBASE ABB=ON HANSEN C?/AU  
 L64 259 SEA FILE=EMBASE ABB=ON COPENHAGEN H?/AU OR NILSSON H?/AU  
 L65 8 SEA FILE=EMBASE ABB=ON (L62 OR L63 OR L64) AND (L60 OR L61)

FILE 'WPIX' ENTERED AT 14:49:02 ON 20 SEP 2007  
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FILE LAST UPDATED: 14 SEP 2007 <20070914/UP>  
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 'BI ABEX' IS DEFAULT SEARCH FIELD FOR 'WPIX' FILE

L74 191 SEA FILE=WPIX ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
 L75 453 SEA FILE=WPIX ABB=ON HANSEN C?/AU  
 L76 157 SEA FILE=WPIX ABB=ON COPENHAGEN H?/AU OR NILSSON H?/AU  
 L77 1 SEA FILE=WPIX ABB=ON L74 AND L75 AND L76  
 L79 3107 SEA FILE=WPIX ABB=ON CACHEXIA/BI,ABEX OR CACHECTIC?/BI,ABEX  
 L80 570 SEA FILE=WPIX ABB=ON B14-E11B/MC OR C14-E11B/MC  
 L81 212 SEA FILE=WPIX ABB=ON GHRELIN/BI,ABEX  
 L82 542701 SEA FILE=WPIX ABB=ON ANALOG?/BI,ABEX OR SECRETAGOG?/BI,ABEX

L84 OR DERIVATI?/BI,ABEX L81 (1A) L82  
 23 SEA FILE-WPIX ABB-ON (L74 OR L75 OR L76) AND (L84 OR (L81 AND  
 L87 8 SEA FILE-WPIX ABB-ON (L79 OR L80))  
 L88 8 SEA FILE-WPIX ABB-ON (L87 OR L77)

FILE 'MEDLINE' ENTERED AT 14:49:03 ON 20 SEP 2007

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PROCESSING COMPLETED FOR L43

PROCESSING COMPLETED FOR L22

PROCESSING COMPLETED FOR L88

PROCESSING COMPLETED FOR L65

L90 18 DUP REM L43 L22 L88 L65 (12 DUPLICATES REMOVED)

ANSWERS '1-9' FROM FILE MEDLINE

ANSWERS '10-14' FROM FILE CAPLUS

ANSWERS '15-17' FROM FILE WPIX

ANSWER '18' FROM FILE EMBASE

--> d iall 1-9; d ibib ab hitind 10-14; d iall abeq tech 15-17; d iall 18

L90 ANSWER 1 OF 18 MEDLINE on STN MEDLINE Full-text DUPLICATE 1

ACCESSION NUMBER: 2007344081 PubMed ID: 17371869

TITLE: Identification of an efficacy switch region in the  
 ghrelin receptor responsible for interchange  
 between agonism and inverse agonism.

AUTHOR: Holst Birgitte; Mokrosinski Jacek; Lang Manja;

Brandt Erik; Nygaard Rie; Frimurer Thomas M; Beck-Sickinger

Annette G; Schwartz Thue W

CORPORATE SOURCE: Laboratory for Molecular Pharmacology, The Panum Institute,  
 Blegdamsvej 3, University of Copenhagen, 2200 Copenhagen N,  
 Denmark.. b.holst@molpharm.dk

SOURCE: The Journal of biological chemistry, (2007 May 25) Vol.

282, No. 21, pp. 15799-811. Electronic Publication:

2007-03-19.

Journal code: 2985121R. ISSN: 0021-9258.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200707

ENTRY DATE: Entered STN: 12 Jun 2007

Last Updated on STN: 19 Jul 2007

Entered Medline: 18 Jul 2007

ABSTRACT:

The carboxyamidated wFwLL peptide was used as a core ligand to probe the  
 structural basis for agonism versus inverse agonism in the constitutively

active ghrelin receptor. In the ligand, an efficacy switch could be  
 built at the N terminus, as exemplified by AwFwLL, which functioned as a high  
 potency agonist, whereas wFwLL was an equally high potency inverse agonist.  
 The wFw-containing peptides, agonists as well as inverse agonists, were  
 affected by receptor mutations covering the whole main ligand-binding pocket  
 with key interaction sites being an aromatic cluster in transmembrane (TM)-VI  
 and -VII and residues on the opposing face of TM-III. Gain-of-function in  
 respect of either increased agonist or inverse agonist potency or swap between  
 high potency versions of these properties was obtained by substitutions at a  
 number of positions covering a broad area of the binding pocket on TM-III, -IV,  
 and -V. However, in particular, space-generating substitutions at position  
 III:04 shifted the efficacy of the ligands from inverse agonism toward agonism,  
 whereas similar substitutions at position III: 08, one helical turn below,  
 shifted the efficacy from agonism toward inverse agonism. It is suggested that  
 the relative position of the ligand in the binding pocket between this  
 "efficacy shift region" on TM-III and the opposing aromatic cluster on TM-VI  
 and TM-VII leads either to agonism, i.e. in a superficial binding mode, or it  
 leads to inverse agonism, i.e. in a more profound binding mode. This  
 relationship between different binding modes and opposite efficacy is in  
 accordance with the Global Toggle Switch model for 7TM receptor activation.

CONTROLLED TERM: Amino Acid Substitution

Animals

Binding Sites: GE, genetics

COS Cells

Cercopithecus aethiops

Humans

Ligands

\*Models, Molecular

Mutation, Missense

\*Peptides: CH, chemistry

Peptides: GE, genetics

Protein Binding: GE, genetics

Protein Structure, Secondary

\*Receptors, G-Protein-Coupled: AG, agonists

Receptors, G-Protein-Coupled: CH, chemistry

Receptors, G-Protein-Coupled: GE, genetics

Structure-Activity Relationship

0 (Ligands); 0 (Peptides); 0 (Receptors,

G-Protein-Coupled); 0 (growth hormone secretagogue

receptor)

L90 ANSWER 2 OF 18 MEDLINE on STN MEDLINE Full-text DUPLICATE 2

ACCESSION NUMBER: 2006740461 PubMed ID: 16959833

DOCUMENT NUMBER: GPR39 signaling is stimulated by zinc ions but not by  
 obestatin.

AUTHOR:

Holst Birgitte; Egerod Kristoffer L; Schild

Enrico; Vickers Steve P; Cheetham Sharon; Gerlach Lars-Ole;

Storjohann Laura; Stidsen Carsten E; Jones Rob;

Beck-Sickinger Annette G; Schwartz Thue W

Laboratory for Molecular Pharmacology, The Panum Institute,

University of Copenhagen, Blegdamsvej 3, DK-2200

Copenhagen, Denmark.

SOURCE: Endocrinology, (2007 Jan) Vol. 148, No. 1, pp. 13-20.

Electronic Publication: 2006-09-07.

Journal code: 0375040. ISSN: 0013-7227.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: (RESEARCH SUPPORT, NON-U.S. GOV'T)

English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
ENTRY MONTH: 200702

ENTRY DATE: Entered STN: 21 Dec 2006  
Last Updated on STN: 14 Feb 2007  
Entered Medline: 13 Feb 2007

## ABSTRACT:

GPR39 is an orphan member of the ghrelin receptor family that recently was suggested to be the receptor for obestatin, a peptide derived from the ghrelin precursor. Here, we compare the effect of obestatin to the effect of Zn(2+) on signal transduction and study the effect of obestatin on food intake. Although Zn(2+) stimulated inositol phosphate turnover, cAMP production, arrestin mobilization, as well as cAMP response element-dependent GPR39-expressing cells as opposed to mock-transfected cells, no reproducible effect was obtained with obestatin in the GPR39-expressing cells. Moreover, no specific binding of obestatin could be detected in two different types of GPR39-expressing cells using three different radiolabeled forms of obestatin. By quantitative PCR analysis, GPR39 expression was readily detected in peripheral organs such as duodenum and kidney but not in the pituitary and hypothalamus, i.e. presumed central target organs for obestatin. Obestatin had no significant and reproducible effect on acute food intake in either freely fed or fasted lean mice. It is concluded that GPR39 is probably not the obestatin receptor. In contrast, the potency and efficacy of Zn(2+) in respect of activating signaling indicates that this metal ion could be a physiologically relevant agonist or modulator of GPR39.

## CONTROLLED TERM:

Animals  
Arrestin: ME, metabolism  
CHO Cells  
COS Cells  
Carcopithecus aethiops  
Cricetinae  
Cricetulus  
Cyclic AMP: ME, metabolism  
DNA-Binding Proteins: GE, genetics  
DNA-Binding Proteins: ME, metabolism  
Eating: DE, drug effects  
Gene Expression: PH, physiology  
Genes, Reporter  
Humans  
Inositol Phosphates: ME, metabolism  
Integrases: GE, genetics  
Kidney: CY, cytology  
Luciferases: GE, genetics  
Mice  
Mice, Inbred C57BL  
\*Peptide Hormones: ME, metabolism  
Peptide Hormones: PD, pharmacology  
Polymerase Chain Reaction  
Receptors, G-Protein-Coupled: GE, genetics  
\*Receptors, G-Protein-Coupled: ME, metabolism  
Signal Transduction: DE, drug effects  
\*Signal Transduction: PH, physiology  
Transcription Factors: GE, genetics  
Transcription Factors: ME, metabolism  
Tritium: DU, diagnostic use  
\*Zinc: ME, metabolism  
Zinc: PD, pharmacology  
10028-17-8 (Tritium); 60-92-4 (Cyclic AMP); 7440-66-6 (Zinc)  
0 (Arrestin); 0 (DNA-Binding Proteins); 0 (GPR39 protein,

human); 0 (Inositol Phosphates); 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (SRE protein, human); 0 (Transcription Factors); 0 (obestatin, human); EC 1.13.12.- (Luciferases); EC 2.7.7.- (Cre recombinase); EC 2.7.7.- (Integrases)

L90 ANSWER 3 OF 18  
ACCESSION NUMBER: 2006499893  
DOCUMENT NUMBER: MEDLINE Full-text  
PUBMED ID: 16798937

TITLE: Ghrelin receptor inverse agonists: identification of an active peptide core and its interaction epitopes on the receptor.

## AUTHOR:

Holst Birgitte; Lang Manja; Brandt Erik; Bach Anders; Howard Andrew; Frimurer Thomas M; Beck-Sickinger Annette; Schwartz Thue W

## CORPORATE SOURCE:

Laboratory for Molecular Pharmacology, The Panum Institute, University of Copenhagen, Blegdamsvej 3, DK-2200 Copenhagen, Denmark.. b.holst@molpharm.dk

## SOURCE:

Molecular pharmacology. (2006 Sep) Vol. 70, No. 3, pp. 936-46. Electronic Publication: 2006-06-23.  
Journal code: 0035623. ISSN: 0026-895X.

## PUB. COUNTRY:

United States

## DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)  
(RESEARCH SUPPORT, NON-U.S. GOV'T)

## LANGUAGE:

English

## FILE SEGMENT:

Priority Journals

200609

## ENTRY MONTH:

Entered STN: 23 Aug 2006

## ENTRY DATE:

Last Updated on STN: 29 Sep 2006

Entered Medline: 28 Sep 2006

## ABSTRACT:

[D-Argl,D-Phe5,D-Trp7,9,leu11]Substance P functions as a low-potency antagonist but a high-potency full inverse agonist on the ghrelin receptor. Through a systematic deletion and substitution analysis of this peptide, the C-terminal carboxyamidated pentapeptide wFLX was identified as the core structure, which itself displayed relatively low inverse agonist potency. Mutational analysis at 17 selected positions in the main ligand-binding crevice of the ghrelin receptor demonstrated that ghrelin apparently interacts only with residues in the middle part of the pocket (i.e., between transmembrane (TM)-III, TM-VI and TM-VII). In contrast, the inverse agonist peptides bind in a pocket that extends all the way from the extracellular end of TM-II (Asp11:20) across between TM-III and TM-VI/VII to TM-V and TM-IV. The potency of the main inverse agonist could be improved up to 20-fold by a number of space-generating mutants located relatively deep in the binding pocket at key positions in TM-III, TM-IV and TM-V. It is proposed that the inverse agonists prevent the spontaneous receptor activation by inserting relatively deeply across the main ligand-binding pocket and sterically blocking the movement of TM-VI and TM-VII into their inward-bend, active conformation. The combined structure-functional analysis of both the ligand and the receptor allowed for the design of a novel, N-terminally Lys-extended analog of wFLX, which rescued the high-potency, selective inverse agonism that was dependent upon both Asp11:20 and Glu11:09. The identified pharmacophore can possibly serve as the basis for targeted discovery of also nonpeptide inverse agonists for the ghrelin receptor.

## CONTROLLED TERM:

Amino Acid Substitution  
Animals  
Binding Sites  
COS Cells  
Cells, Cultured

Cercopithecus aethiops  
 \*Epitopes: ME, metabolism  
 Humans  
 Ligands  
 Models, Molecular  
 Molecular Sequence Data  
 Mutant Proteins: AG, agonists  
 Mutant Proteins: CH, chemistry  
 Peptide Hormones: ME, metabolism  
 \*Peptides: CH, chemistry  
 Protein Binding  
 Receptors, G-Protein-Coupled: AG, agonists  
 Receptors, G-Protein-Coupled: CH, chemistry  
 Structure-Activity Relationship  
 \*Substance P: AA, analogs & derivatives  
 Substance P: CH, chemistry  
 33507-63-0 (Substance P); 96736-12-8 (substance P,  
 Phe(5)-Trp(7,9)-Leu(11)-)  
 0 (Epitopes); 0 (Ligands); 0 (Mutant Proteins); 0 (Peptide  
 Hormones); 0 (Peptides); 0 (Receptors, G-Protein-Coupled);  
 0 (ghrelin); 0 (growth hormone secretagogue  
 receptor)

CAS REGISTRY NO.:

CHEMICAL NAME:

L90 ANSWER 4 OF 18

MEDLINE on STN DUPLICATE 9

ACCESSION NUMBER: 2005456178 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 15903539

TITLE: Nonpeptide and peptide growth hormone secretagogues act both as ghrelin receptor agonist and as positive or negative allosteric modulators of ghrelin signaling.

AUTHOR: Holst Birgitte; Brandt Erik; Bach Anders; Heding

CORPORATE SOURCE: Anders; Schwartz Thue W  
 Laboratory for Molecular Pharmacology, Department of Pharmacology, The Panum Institute, Blegdamsvej 3, DK-2200, Copenhagen, Denmark.. b.holst@molpharm.dk  
 SOURCE: Molecular endocrinology (Baltimore, Md.), (2005 Sep) Vol. 19, No. 9, pp. 2400-11. Electronic Publication: 2005-05-19.

Journal code: 8801431. ISSN: 0888-8809.

PUB. COUNTRY: United States

DOCUMENT TYPE: (COMPARATIVE STUDY)

Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200512

ENTRY DATE: Entered STN: 27 Aug 2005

Last Updated on STN: 30 Dec 2005

Entered Medline: 29 Dec 2005

ABSTRACT:

Two nonpeptide (L692,429 and MK-677) and two peptide [GH-releasing peptide (GHRP)-6 and ghrelin] agonists were compared in binding and in signal transduction assays: calcium mobilization, inositol phosphate turnover, cAMP-responsive element (CRE), and serum-responsive element (SRE) controlled transcription, as well as arrestin mobilization. MK-677 acted as a simple agonist having an affinity of 6.5 nM and activated all signal transduction systems with similar high potency (0.2-1.4 nM). L-692,429 also displayed a very similar potency in all signaling assays (25-60 nM) but competed with a 1000-fold lower apparent affinity for ghrelin binding and surprisingly acted as a positive allosteric receptor modulator by increasing

\*\*\*ghrelin\*\*\* 's potency 4- to 10-fold. In contrast, the potency of GHRP-6 varied 600-fold (0.1-61 nM) depending on the signal transduction assay, and it acted as a negative allosteric modulator of ghrelin signaling.

Unexpectedly, the maximal signaling efficacy for ghrelin was increased above what was observed with the hormone itself during coadministration with the nonendogenous agonists. It is concluded that agonists for the ghrelin receptor vary both in respect of their intrinsic agonist properties and in their ability to modulate ghrelin signaling. A receptor model is presented wherein ghrelin normally only activates one receptor subunit in a dimer and where the smaller nonendogenous agonists bind in the other subunit to act both as coagonists and as either neutral (MK-677), positive (L-692,429), or negative (GHRP-6) modulators of ghrelin function. It is suggested that an optimal drug candidate could be an agonist that also is a positive modulator of \*\*\*ghrelin\*\*\* signaling.

CONTROLLED TERM:

Allosteric Regulation

Amino Acid Sequence

Animals

Arrestin: ME, metabolism

Benzazepines: CH, chemistry

\*Benzazepines: PD, pharmacology

CREB-Binding Protein: ME, metabolism

Calcium: ME, metabolism

Humans

Indoles: CH, chemistry

\*Indoles: PD, pharmacology

Inositol Phosphates: ME, metabolism

Molecular Sequence Data

Molecular Structure

Oligopeptides: CH, chemistry

\*Oligopeptides: PD, pharmacology

Peptide Hormones: CH, chemistry

\*Peptide Hormones: PD, pharmacology

\*Receptors, G-Protein-Coupled: AG, agonists

Response Elements

Serum Response Element

Signal Transduction

\*Spiro Compounds: CH, chemistry

\*Spiro Compounds: PD, pharmacology

Tetrazoles: CH, chemistry

\*Tetrazoles: PD, pharmacology

Transcription, Genetic

145455-23-8 (L 692429); 7440-70-2 (Calcium); 87616-84-0

(growth hormone releasing hexapeptide)

0 (Arrestin); 0 (Benzazepines); 0 (CREBBP protein, human);

0 (Indoles); 0 (Inositol Phosphates); 0 (L 163191); 0

(oligopeptides); 0 (Peptide Hormones); 0 (Receptors,

G-Protein-Coupled); 0 (Spiro Compounds); 0 (Tetrazoles); 0

(ghrelin); 0 (growth hormone secretagogue

receptor); EC 2.3.1.48 (CREB-Binding Protein)

L90 ANSWER 5 OF 18 MEDLINE on STN DUPLICATE 10

2004643243 MEDLINE Full-text

ACCESSION NUMBER:

PubMed ID: 15383539

DOCUMENT NUMBER:

TITLE: Common structural basis for constitutive activity of the

ghrelin receptor family.

Holst Birgitte; Holliday Nicholas D; Bach Anders;

Elling Christian E; Cox Helen M; Schwartz Thue W

LABORATORY FOR MOLECULAR PHARMACOLOGY, DEPARTMENT OF

PHARMACOLOGY, THE PANUM INSTITUTE, UNIVERSITY OF

Copenhagen, Blegdamsvej 3, DK-2200, Copenhagen, Denmark..  
b.holst@molpharm.dk  
The Journal of Biological Chemistry, (2004 Dec 17) Vol.  
279, No. 51, pp. 53806-17. Electronic Publication:  
2004-09-21.  
Journal code: 2985121R. ISSN: 0021-9258.

PUB. COUNTRY:  
DOCUMENT TYPE:

United States  
Journal; Article: (JOURNAL ARTICLE)  
(RESEARCH SUPPORT, NON-U.S. GOV'T)

LANGUAGE:  
FILE SEGMENT:

ENTRY MONTH:

ENTRY DATE:

Entered STN: 29 Dec 2004  
Last Updated on STN: 5 Feb 2005  
Entered Medline: 4 Feb 2005

#### ABSTRACT:

Three members of the ghrelin receptor family were characterized in parallel: the ghrelin receptor, the neurotensin receptor 2 and the orphan receptor GPR39. In transiently transfected COS-7 and human embryonic kidney 293 cells, all three receptors displayed a high degree of ligand-independent signaling activity. The structurally homologous motilin receptor served as a constitutively silent control; upon agonist stimulation, however, it signaled with a similar efficacy to the three related receptors. The constitutive activity of the ghrelin receptor and of neurotensin receptor 2 through the G(q), phospholipase C pathway was approximately 50% of their maximal capacity as determined through inositol phosphate accumulation. These two receptors also showed very high constitutive activity in activation of cAMP response element-driven transcription. GPR39 displayed a clear but lower degree of constitutive activity through the inositol phosphate and cAMP response element pathways. In contrast, GPR39 signaled with the highest constitutive activity in respect of activation of serum response element-dependent transcription, in part, possibly, through G(12/13) and Rho kinase. Antibody feeding experiments demonstrated that the epitope-tagged \*\*\*ghrelin\*\* receptor was constitutively internalized but could be trapped at the cell surface by an inverse agonist, whereas GPR39 remained at the cell surface. Mutational analysis showed that the constitutive activity of both the \*\*\*ghrelin\*\* receptor and GPR39 could systematically be tuned up and down depending on the size and hydrophobicity of the side chain in position VII:16 in the context of an aromatic residue at VII:09 and a large hydrophobic residue at VII:06. It is concluded that the three ghrelin-like receptors display an unusually high degree of constitutive activity, the structural basis for which is determined by an aromatic cluster on the inner face of the extracellular ends of TMs VI and VII.

#### CONTROLLED TERM:

Amino Acid Sequence  
Animals  
COS Cells  
Cell Line  
Cyclic AMP: ME, metabolism  
DNA Mutational Analysis  
DNA, Complementary: ME, metabolism  
Dose-Response Relationship, Drug  
Enzyme-Linked Immunosorbent Assay  
GTP-Binding Protein alpha Subunits, G12-G13: ME, metabolism  
Humans  
Inositol Phosphates: ME, metabolism  
Ligands  
MAP Kinase Signaling System  
Microscopy  
Models, Molecular

Molecular Sequence Data  
Phosphatidylinositols: CH, chemistry  
Phospholipase C: ME, metabolism  
Phylogeny  
Protein Conformation  
Protein Structure, Secondary  
Protein Structure, Tertiary

\*Receptors, G-Protein-Coupled: CH, chemistry  
\*Receptors, G-Protein-Coupled: PH, physiology  
Receptors, Gastrointestinal Hormone: CH, chemistry  
Receptors, Gastrointestinal Hormone: ME, metabolism  
Receptors, Neuropeptide: CH, chemistry  
Receptors, Neuropeptide: ME, metabolism  
\*Receptors, Neurotensin: ME, metabolism  
Signal Transduction  
Transcription, Genetic  
Transfection

CAS REGISTRY NO.:  
CHEMICAL NAME:

60-92-4 (Cyclic AMP)  
0 (DNA, Complementary); 0 (GPR39 protein, human); 0  
(Inositol Phosphates); 0 (Ligands); 0  
(Phosphatidylinositols); 0 (Receptors, G-Protein-Coupled);  
0 (Receptors, Gastrointestinal Hormone); 0 (Receptors,  
Neuropeptide); 0 (Receptors, Neurotensin); 0 (growth  
hormone secretagogue receptor); 0 (motilin receptor); EC  
3.1.4.3 (Phospholipase C); EC 3.6.1.46 (GTP-Binding Protein  
alpha Subunits, G12-G13)

L90 ANSWER 6 OF 18  
ACCESSION NUMBER:

DOCUMENT NUMBER:

TITLE:

AUTHOR:

CORPORATE SOURCE:

SOURCE:

PUB. COUNTRY:  
DOCUMENT TYPE:

LANGUAGE:

ENTRY MONTH:

ENTRY DATE:

CONTROLLED TERM:

English  
Priority Journals  
200404  
Entered STN: 3 Apr 2004  
Last Updated on STN: 20 Apr 2004  
Entered Medline: 19 Apr 2004  
Animals  
\*Appetite: PH, physiology  
Eating: PH, physiology  
Humans

\*Peptide Hormones: PH, physiology  
\*Receptors, G-Protein-Coupled: PH, physiology  
\*Signal Transduction: PE, drug effects  
0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)

CHEMICAL NAME:

L90 ANSWER 7 OF 18  
ACCESSION NUMBER:

MEDLINE on STN  
2003514700 MEDLINE Full-text  
DUPLICATE 12

**DOCUMENT NUMBER:** PubMed ID: 12907757  
**TITLE:** High constitutive signaling of the ghrelin receptor--identification of a potent inverse agonist.  
**AUTHOR:** Holst Birgitte; Cygankiewicz Adam; Jensen Tine; Halkjaer; Ankersen Michael; Schwartz Thue W  
**CORPORATE SOURCE:** Laboratory for Molecular Pharmacology, Institute of Pharmacology, The Panum Institute, University of Copenhagen, DK-2200 Copenhagen, Denmark...  
**SOURCE:** b.holst@molpharm.dk  
 Molecular endocrinology (Baltimore, Md.), (2003 Nov) Vol. 17, No. 11, pp. 2201-10. Electronic Publication: 2003-08-07.  
**PUB. COUNTRY:** United States  
**DOCUMENT TYPE:** Journal: Article; (JOURNAL ARTICLE)  
 (RESEARCH SUPPORT, NON-U.S. GOV'T)  
**LANGUAGE:** English  
**FILE SEGMENT:** Priority Journals  
**ENTRY MONTH:** 200407  
**ENTRY DATE:** Entered STN: 1 Nov 2003  
 Last Updated on STN: 14 Jul 2004  
 Entered Medline: 13 Jul 2004

**ABSTRACT:**  
 Ghrelin is a GH-releasing peptide that also has an important role as an orexigenic hormone-stimulating food intake. By measuring inositol phosphate turnover or by using a reporter assay for transcriptional activity controlled by cAMP-responsive elements, the ghrelin receptor showed strong, ligand-independent signaling in transfected COS-7 or human embryonic kidney 293 cells. Ghrelin and a number of the known nonpeptide GH secretagogues acted as agonists stimulating inositol phosphate turnover further. In contrast, the low potency ghrelin antagonist, [D-Arg1,D-Phe5,D-Trp1,9,Leu11]-substance P was surprisingly found to be a high potency (EC50 = 5.2 nM) full inverse agonist as it decreased the constitutive signaling of the \*\*\*ghrelin\*\* receptor down to that observed in untransfected cells. The homologous motilin receptor functioned as a negative control as it did not display any sign of constitutive activity; however, upon agonist stimulation the motilin receptor signaled as strongly as the unstimulated ghrelin receptor. It is concluded that the ghrelin receptor is highly constitutively active and that this activity could be of physiological importance in its role as a regulator of both GH secretion and appetite control. It is suggested that inverse agonists for the ghrelin receptor could be particularly interesting for the treatment of obesity.

**CONTROLLED TERM:**  
 Amino Acid Sequence  
 Animals  
 Cell Line  
 Cercopithecus aethiops  
 Cyclic AMP Response Element-Binding Protein: ME, metabolism  
 Humans  
 Inositol Phosphates: ME, metabolism  
 Ligands  
 Molecular Sequence Data  
 Molecular Structure  
 Obesity: ME, metabolism  
 Peptide Hormones: ME, metabolism  
 Phospholipase C: ME, metabolism  
 \*Receptors, G-Protein-Coupled: AG, agonists  
 Receptors, G-Protein-Coupled: AI, antagonists & inhibitors  
 Receptors, G-Protein-Coupled: CH, chemistry  
 \*Receptors, G-Protein-Coupled: ME, metabolism

**CHEMICAL NAME:** Response Elements: GE, genetics  
 \*Signal Transduction  
 0 (Cyclic AMP Response Element-Binding Protein); 0 (Inositol Phosphates); 0 (Ligands); 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor); EC 3.1.4.3 (phospholipase C)

**L90 ANSWER 8 OF 18**  
**ACCESSION NUMBER:** 2007377132 MEDLINE Full-text  
**DOCUMENT NUMBER:** Pubmed ID: 17488974  
**TITLE:** GPR39 splice variants versus antisense gene LYPD1: expression and regulation in gastrointestinal tract, endocrine pancreas, liver, and white adipose tissue.  
**AUTHOR:** Egerod Kristoffer L; Holst Birgitte; Petersen Pia S; Hansen Jacob B; Mulder Jan; Hokfelt Tomas; Schwartz Thue W

**CORPORATE SOURCE:** Laboratory for Molecular Pharmacology, Department of Neuroscience and Pharmacology, University of Copenhagen, DK-2200 Copenhagen, Denmark.  
**SOURCE:** Molecular endocrinology (Baltimore, Md.), (2007 Jul) Vol. 21, No. 7, pp. 1685-98. Electronic Publication: 2007-05-08.  
**Journal code:** 8801431. ISSN: 0888-8809.

**PUB. COUNTRY:** United States  
**DOCUMENT TYPE:** Journal: Article; (JOURNAL ARTICLE)  
 (RESEARCH SUPPORT, NON-U.S. GOV'T)  
**LANGUAGE:** English  
**FILE SEGMENT:** Priority Journals  
**ENTRY MONTH:** 200708  
**ENTRY DATE:** Entered STN: 28 Jun 2007  
 Last Updated on STN: 16 Aug 2007  
 Entered Medline: 15 Aug 2007

**ABSTRACT:**  
 G protein-coupled receptor 39 (GPR39) is a constitutively active, orphan member of the ghrelin receptor family that is activated by zinc ions. GPR39 is here described to be expressed in a full-length, biologically active seven-transmembrane form, GPR39-1a, as well as in a truncated splice variant five-transmembrane form, GPR39-1b. The 3' exon of the GPR39 gene overlaps with an antisense gene called LYPD1 (Ly-6/PLAUR domain containing 1). Quantitative RT-PCR analysis demonstrated that GPR39-1a is expressed selectively throughout the gastrointestinal tract, including the liver and pancreas as well as in the kidney and adipose tissue, whereas the truncated GPR39-1b form has a more broad expression pattern, including the central nervous system but with highest expression in the stomach and small intestine. In contrast, the LYPD1 antisense gene is highly expressed throughout the central nervous system as characterized with both quantitative RT-PCR and in situ hybridization analysis. A functional analysis of the GPR39 promoter region identified sites for the hepatocyte nuclear factors 1alpha and 4alpha (HNF-1alpha and -4alpha) and specificity protein 1 (SP1) transcription factors as being important for the expression of GPR39. In vivo experiments in rats demonstrated that GPR39 is up-regulated in adipose tissue during fasting and in response to streptozotocin treatment, although its expression is kept constant in the liver from the same animals. GPR39-1a was expressed in white but not brown adipose tissue and was down-regulated during adipocyte differentiation of fibroblasts. It is concluded that the transcriptional control mechanism, the tissue expression pattern, and in vivo response to physiological stimuli all indicate that the GPR39 receptor very likely is of importance for the function of a number of metabolic organs, including the liver, gastrointestinal tract, pancreas, and adipose tissue.

## CONTROLLED TERM:

Check Tags: Male  
 Adipose Tissue: ME, metabolism  
 Adipose Tissue, Brown: ME, metabolism  
 Alternative Splicing  
 Amino Acid Sequence  
 Animals  
 \*Antisense Elements (Genetics)  
 Base Sequence  
 Cell Line  
 DNA Primers: GE, genetics  
 Diabetes Mellitus, Experimental: GE, genetics  
 Diabetes Mellitus, Experimental: ME, metabolism  
 Gastrointestinal Tract: ME, metabolism  
 Gene Expression Regulation  
 Humans  
 In Situ Hybridization  
 Islets of Langerhans: ME, metabolism  
 Liver: ME, metabolism  
 Models, Molecular  
 Molecular Sequence Data  
 Promoter Regions (Genetics)  
 RNA, Messenger: GE, genetics  
 RNA, Messenger: ME, metabolism  
 Rats  
 Rats, Wistar  
 Receptors, G-Protein-Coupled: CH, chemistry  
 \*Receptors, G-Protein-Coupled: GE, genetics  
 \*Receptors, G-Protein-Coupled: ME, metabolism  
 Reverse Transcriptase Polymerase Chain Reaction  
 Tissue Distribution  
 0 (Antisense Elements (Genetics)); 0 (DNA Primers); 0 (RNA, Messenger); 0 (Receptors, G-Protein-Coupled)

## CHEMICAL NAME:

L90 ANSWER 9 OF 18

2006123975 MEDLINE Full-text  
 PubMed ID: 16511600  
 Ghrelin receptor mutations--too little height and too much hunger.

## AUTHOR:

Holst Birgitte; Schwartz Thue W

Laboratory for Molecular Pharmacology, Panum Institute, University of Copenhagen, Copenhagen, Denmark.

The Journal of clinical investigation, (2006 Mar) Vol. 116, No. 3, pp. 637-41. Ref: 19

Journal code: 7802877. ISSN: 0021-9738.

Comment on: J Clin Invest. 2006 Mar;116(3):760-8. PubMed ID: 16511605

United States

## PUB. COUNTRY:

## DOCUMENT TYPE:

Commentary

Journal; Article; (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

General Review; (REVIEW)

## LANGUAGE:

English  
 Abridged Index Medicus Journals: Priority Journals

200604

## FILE SEGMENT:

## ENTRY MONTH:

Entered STN: 3 Mar 2006

Last Updated on STN: 7 Apr 2006

Entered Medline: 6 Apr 2006

## ABSTRACT:

The ghrelin receptor is known from in vitro studies to signal in the absence of the hormone ghrelin at almost 50% of its maximal capacity.

But, as for many other 7-transmembrane receptors, the in vivo importance of this ligand-independent signaling has remained unclear. In this issue of the JCI, Pantel et al. find that a natural mutation in the ghrelin receptor, Ala204Glu, which is associated with a selective loss of constitutive activity without affecting ghrelin affinity, potency, or efficacy, segregates in 2 families with the development of short stature (see the related article beginning on page 760). By combination of the observations from this study with those related to the phenotype of subjects carrying another natural \*\*\*ghrelin\*\*\* receptor mutation, Phe279Leu, having identical molecular-pharmacological properties, it is proposed that selective lack of \*\*\*ghrelin\*\*\* receptor constitutive signaling leads to a syndrome characterized not only by short stature, but also by obesity that apparently develops during puberty.

## CONTROLLED TERM:

\*Amino Acid Substitution: GE, genetics

\*Body Height: GE, genetics

Humans

\*Hunger: PH, physiology

Obesity: GE, genetics

Obesity: ME, metabolism

Obesity: PP, physiopathology

\*Peptide Hormones: ME, metabolism

Puberty: GE, genetics

Puberty: ME, metabolism

\*Receptors, G-Protein-Coupled: DF, deficiency

\*Receptors, G-Protein-Coupled: GE, genetics

Receptors, G-Protein-Coupled: PH, physiology

Signal transduction: GE, genetics

Syndrome

CHEMICAL NAME:  
 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)

L90 ANSWER 10 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 3

2006:410127 CAPLUS Full-text

144:445679

Uses of growth hormone secretagogues in the treatment

of individuals suffering from renal and/or liver

failure

Lange, Birgitte Holst; Schambye, Hans T.;

Nielsen, Tina Geritz

Gastrotech Pharma A/S, Den.

PCT Int. Appl., 85 pp.

CODEN: PIXXD2

## DOCUMENT TYPE:

Patent

English

## FAMILY ACC. NUM. COUNT:

1

## PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006045319	A2	20060504	WO 2005-DK694	20051027
WO 2006045319	A3	20060928		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, LY, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VC,			

VN, YU, ZA, ZM, ZW  
 RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GO, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, NZ, NA, SD, SL, SZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM  
 EP 1812044 A2 20070801 EP 2005-796707 20051027  
 R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA, HR, MK, YU  
 PRIORITY APPLN. INFO.:  
 DK 2004-1654 A 20041027  
 WO 2005-DK694 W 20051027

OTHER SOURCE(S):  
 AB The invention relates to the use of a secretagogue compound for the preparation of a medicament for treatment of an individual suffering from renal failure and/or liver failure. Furthermore, the invention relates to a method for stimulating appetite, food intake and/or weight gain in an individual suffering from liver failure and/or renal failure, said method comprising administration of a secretagogue to said patient.  
 CC 2-5 (Mammalian Hormones)

IT 304853-26-7, Ghrelin 304853-26-7D, Growth hormone secretagogue, -like compds, and salts  
 RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (uses of growth hormone secretagogues in treatment of individuals suffering from renal and/or liver failure)

L90 ANSWER 11 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 4  
 ACCESSION NUMBER: 2006:412018 CAPLUS Full-text  
 DOCUMENT NUMBER: 144:404881  
 TITLE: Use of a growth hormone secretagogue for increasing or maintaining lean body mass and/or for treatment of chronic obstructive pulmonary disease

INVENTOR(S): Lange, Birgitte Holst; Schambye, Hans T.; Nielsen, Tina Geritz  
 PATENT ASSIGNEE(S): Gastrotech Pharma A/S, Den.  
 SOURCE: PCT Int. Appl., 78 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006045314	A2	20060504	WO 2005-DK689	20051026
WO 2006045314	A3	20070412		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KM, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, LY, MA, MD, MG, MK, MN, MW, MX, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GN, GO, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, UG, ZM, ZW, AM, AZ, BY,			

KG, KZ, MD, RU, TJ, TM, AP, EA, EP, OA  
 PRIORITY APPLN. INFO.:  
 DK 2004-1657 A 20041027  
 DK 2005-242 A 20050216  
 US 2005-653116P P 20050216

OTHER SOURCE(S):  
 AB The present invention relates to a method for increasing or maintaining lean body mass in an individual in need thereof, by administering a secretagogue. The present invention also relates in another aspect to the use of a secretagogue for the production of a medicament for use in increasing or maintaining an individual's lean body mass, preferably in an individual suffering from, or at risk of suffering from, cachexia, such as cancer cachexia.  
 IC ICM A61K  
 CC 2-5 (Mammalian Hormones)

IT 258279-04-8, Human ghrelin 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, salts and -like compds.  
 RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (use of a growth hormone secretagogue for increasing or maintaining lean body mass and/or for treatment of chronic obstructive pulmonary disease)

L90 ANSWER 12 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 6  
 ACCESSION NUMBER: 2005:1130666 CAPLUS Full-text  
 DOCUMENT NUMBER: 143:385176  
 TITLE: Prolonging the biological activity of human ghrelin

INVENTOR(S): Hansen, Christian  
 PATENT ASSIGNEE(S): Gastrotech Pharma A/S, Den.  
 SOURCE: PCT Int. Appl., 88 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005097831	A2	20051020	WO 2005-DK241	20050407
WO 2005097831	A3	20051222		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KM, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, MD, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GO, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.:  
 AB The author discloses the use of immunol. and non-immunol. biomols. that target human ghrelin or ghrelin-like compds. In one aspect, these biomols. comprise antibodies and/or antibodies for mediating appetite regulation in an individual by prolonging the serum half-life of ghrelin.

IC ICM C07K016-18  
 ICS A61K039-395  
 CC 15-3 (Immunology)



IT 304853-26-7D, Ghrelin, derivs.

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(enhanced serum half-life of)

L90 ANSWER 13 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 7

ACCESSION NUMBER: 2005:1123798 CAPLUS Full-text

DOCUMENT NUMBER: 143:400386

TITLE: Use of a secretagogue for the treatment of ghrelin

deficiency

INVENTOR(S): Nilsson, Henrik; Lange, Birgitte

PATENT ASSIGNEE(S): Holst; Post, Claes; Nielsen, Tina Geritz

SOURCE: Gastrotech Pharma A/S, Den.

PCT Int. Appl., 83 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005097173	A2	20051020	WO 2005-DK237	20050407
WO 2005097173	A3	20051229		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KP, KR, KZ, LC, LK, LR, LS, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GN, GO, GW, ML, MR, NE, SN, TD, TG			
EP 1742655	A2	20070117	EP 2005-715155	20050407
R:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA, HR, LV, MK, YU			
PRIORITY APPL. INFO.:				
			DK 2004-569	A 20040407
			DK 2004-1656	A 20041027
			WO 2005-DK237	W 20050407

OTHER SOURCE(S): MARPAT 143:400386

AB The present invention relates to the use of a growth hormone (GH) secretagogue, such as a ghrelin-like compound, for the preparation of a medicament for the prophylaxis or treatment of ghrelin deficiency, and/or undesirable symptoms associated therewith, in an individual at risk of acquiring partial or complete ghrelin deficiency resulting from a medical treatment and/or from a pathol. condition. The present invention also relates to use of a secretagogue compound for the preparation of a medicament for the prophylaxis or treatment of one or more of: loss of fat mass, loss of lean body mass, weight loss, cachexia, loss of appetite, immunol. dysfunction, malnutrition, disrupted sleep pattern, sleepiness, reduction in intestinal absorption and/or intestinal motility problems in an individual suffering from, or at risk of suffering from, ghrelin deficiency. Furthermore, the present invention relates to the use of a secretagogue, such as a ghrelin-like compound, for the production of a medicament for preventing weight increase in an individual either: (a) being converted from a hyperthyroidic state to

hyperthyroidic state, or (b) in remission from being converted from a hyperthyroidic state to euthyroid state.

IC ICM A61K038-25

ICS A61P003-00; A61P005-14

CC 2-6 (Mammalian Hormones)

IT 304853-26-7D, Ghrelin, -like compds.

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(use of a secretagogue for treatment of symptoms associated with ghrelin deficiency caused by pathol. conditions)

L90 ANSWER 14 OF 18 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 8

ACCESSION NUMBER: 2005:136591 CAPLUS Full-text

DOCUMENT NUMBER: 142:233847

TITLE: Uses of ghrelin-like secretagogues for treatment of

cancer cachexia

INVENTOR(S): Lange, Birgitte Holst; Hansen,

Christian; Nilsson, Henrik

Gastrotech Pharma A/S, Den.

PCT Int. Appl., 148 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005014032	A2	20050217	WO 2004-DK529	20040806
WO 2005014032	A3	20050317		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GN, GO, GW, ML, MR, NE, SN, TD, TG			
EP 1660117	A2	20060531	EP 2004-739026	20040806
R:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA, HR, LV, MK, YU			
CN 1863550	A	20061115	CN 2004-80029235	20040806
JP 2007523048	T	20070816	JP 2006-522237	20040806
IN 2006CN00784	A	20070622	IN 2006-CN784	20060303
US 2007037751	A1	20070215	US 2006-567406	20061019
PRIORITY APPL. INFO.:				
			DK 2003-1139	A 20030806
			DK 2003-1140	A 20030806
			US 2003-494815P	P 20030814
			US 2003-494816P	P 20030814
			DK 2003-1283	A 20030905
			DK 2003-1569	A 20031024
			DK 2003-1570	A 20031024
			DK 2004-570	A 20040407
			WO 2004-DK529	W 20040806

OTHER SOURCE(S): MARPAT 142:233847

AB The present invention relates, in one aspect, to the use of a secretagogue compound for the preparation of a medicament for the prophylaxis or treatment

of cancer cachexia in an individual in need of such treatment. In another aspect, the present invention relates to the use of a ghrelin-like compound for the preparation of a medicament for prophylaxis or treatment of cachexia in an individual by administering a s.c. dosage of said medicament to the individual. In a further aspect, the present invention relates to the use of a ghrelin-like compound or a pharmaceutically acceptable salt thereof for the preparation of a medicament for stimulation of appetite in an individual by administering a s.c. dosage of said medicament to the individual. Furthermore, the present invention relates to a number of new ghrelin-like compds. and uses thereof, as well as to pharmaceutical compns. and medical packaging comprising the new ghrelin-like compds.

IC A61K038-25  
ICS C07K014-60; G01N033-74; A61P001-14  
CC 2-6 (Mammalian Hormones)  
Section cross-reference(s): 34  
IT 258279-04-8P 304853-26-7DP, Ghrelin, -like compds. 321974-68-9  
P 843660-25-3P  
RL PAC (Pharmacological activity); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)  
(uses of ghrelin-like secretagogues for treatment of cancer cachexia)

L90 ANSWER 15 OF 18 WPX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: 2007-008941 [01] WPX  
DOC. NO. CPI: C2007-003140 [01]  
TITLE: Novel growth hormone secretagogue receptor 1A ligand compound useful for treating growth hormone secretagogue receptor 1A associated diseases such as cachexia  
DERWENT CLASS: B04; B05; D13; D16  
INVENTOR: JENSEN P H; LANGE B H; SCHAMBYE H T  
PATENT ASSIGNEE: (GAST-N) GASTROTECH PHARMA AS  
COUNTRY COUNT: 111

## PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG	MAIN IPC
WO 2006058539	A2	20060608	(200701)*	EN	138	[3]

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2006058539	A2	WO 2005-DK763	20051129

PRIORITY APPLN. INFO: DK 2004-1875

20041130

INT. PATENT CLASSIF.: A61K [3]

BASIC ABSTRACT:

WO 2006058539 A2 UPAB: 20070102  
NOVELTY - Growth hormone secretagogue receptor 1A (GHS-R1A) ligand compounds (I'), (I''), and (I'''), are new.  
DETAILED DESCRIPTION - Growth hormone secretagogue receptor 1A (GHS-R1A) ligand compound is chosen from compound of formula (I): 22-(X3)n-(X2)-(X1)m-23-21, compound of formula (II): 21-(X1)m-(X2)-(X3)n-22, compound of formula (III): 21-X1-X2-X3-X4-X5-X6-22, and compound of formula (IV): 21-R1-(X2)-(X3)n-22, or its salt. In formula (II):

21,22=optionally present protecting group; X1=amino acid; X2=anchor group, preferably amino acid being modified; X3=amino acids, in which at least one (X3) is a D-amino acid; Z3=optionally present linker or C-terminal group; m=0-3; and n=0-35, in which both n and m cannot be 0. In formula (I): 21,22=X1=amino acid as defined above; X2=anchor group chosen from amino acid being modified with glycerophospholipid, sterol moiety, sphingolipid moiety, ceramide or its analog, isorenoid pyrophosphate, glycosyl-phosphatidylinositol (GPI) anchor, or phosphatidylserine or its analog, or alternatively X2 is chosen from L or D form of decenoic acid, tri(5-NH2), 5-hexenoic acid, 6-heptenoic acid, 7-octenoic acid, 8-nonoic acid, Ala-3-ep, Ala-3-cb, Phe-4-Me, Phe-4-Et, Phe-4-IPr, Phe-4-Ph, beta-MeTrp, Ala(3-(3-Quinoliny))l, Ala(3-(2-benzimidazolyl)), BenzoTrp and 7-AzaTrp; X3=amino acid; m=0-10; and

n=0-35, in which m and n cannot both be 0. In formula (III):

21,22=same as defined above; X1=amino acid having a structure of formula (B): X7-spacer with length of 1-8 chemical bonds; X8=hydrogen bond donor such as amine or hydroxyl group; X2,X3,X5=aromatic amino acids; X4=optionally present amino acid; and X6=optionally present and chosen from alcohol, ether, hydrocarbon, hydrazine, peptide and peptidomimetic moiety. Where at least one of X1-X5 is a D-amino acid. In formula (IV): R1=betaAla-, betaAla-X1-, GABA-, GABA-X1-, aminopentanoyl-X1, hydroxy acetic acid (HAA)-, HAA-X1-, or compound of formula (B): X7,X8=same as defined above; 21,22,X1=same as defined above; X2=anchor group such as any amino acid being modified with a bulky group; X3=amino acid, or optionally an anchor group; and n=0-35.

INDEPENDENT CLAIMS are also included for: (1) pharmaceutical composition comprising the GHS-R1A ligand compound or its salt, and carrier, vehicles and/or excipients; (2) a medical packaging comprising one or more dosage units of the pharmaceutical composition; and

(3) treatment comprising administering GHS-R1A ligand compound or its salt to an individual in need of treatment. ACTIVITY - Antidiabetic; Cardiant; Antinflammatory; Cytostatic; Immunomodulator; Osteopathic; Endocrine-Gen.; Antihypertensive; Anorectic; Eating-Disorders-Gen.

Sprague-Dawley rats were used in the study. The animals were caged individually and fed with a commercial diet. All animals were allowed on acclimatization period of minimum of 7 days prior to the commencement of the experiment. The animals were separated in six groups and each group was respectively treated twice daily with subcutaneous injection of sodium chloride solution (control), 200 micrograms/kg body weight of ghrelin (positive control), 50 or 200 micrograms/kg body weight of GTP-5 and GTP-6 (growth hormone secretagogue receptor 1A (GHS-R1A) ligand compound). The weight of the animals, and their food and water were recorded daily. The animals were killed and epididymal, subcutaneous and retroperitoneal fat pads were dissected and weighed. The ghrelin group gained significantly more weight than the saline group. Furthermore, the GTP-5 and GTP-6 groups showed higher weight gain and cumulative food intake than saline group. Ghrelin, GTP-5 and GTP-6 were found to induce an increase in subcutaneous fat depots.

## MECHANISM OF ACTION - Modulator of GHS-R1A.

USE - The GHS-R1A ligand compound or its salt, is useful for the preparation of medicament for the treatment of an individual (claimed). The GHS-R1A ligand compound is useful for treating and/or preventing GHS-R1A associated diseases such as cachexia in individuals suffering from disease (e.g. Cancer, AIDS, cardiac failure, liver failure and chronic infection), heart failure, bone and cartilage related disease, bone fracture, inflammatory diseases, malignant disease, hyperthyroidism, obesity and diabetes, and in preparation of medicament for stimulation of appetite, food intake and/or weight gain, and for increasing body fat mass and/or lean body mass.

ADVANTAGE - The anchor groups improve the anchorage of the GHS-R1A ligand in the cell membrane and thus improve the efficacy of GHS-R1A ligand. The GHS-R1A exhibits increase half-life in blood. DESCRIPTION OF DRAWINGS - The figure shows a

graph representing the total weight gain of rats treated with the growth hormone secretagogue receptor 1A ligand compound, saline or ghrelin. MANUAL CODE: CPI: B04-B01B; B04-N04H; B04-N04A; B04-N04OE; B11-C06;

B14-C03; B14-E1B; B14-E12; B14-F01B; B14-H01; B14-L01; B14-L06; B14-L06; B14-N01; B14-N11; B14-S04; D03-H01T2; D03-H17A

## TECH

BIOTECHNOLOGY - Preparation (disclosed): The GHS-R1A ligand compound is prepared by standard peptide synthesis and recombinant methods. Preferred Compound: The GHS-R1A ligand compound of formula (II) is chosen from compound of formula (IIa): 22-(X3)n-(X2)-(X1)m-1-Gly-Z1, formula (IIIfa): 22-(X3)n-(X2)-D-Ser-Gly-Z1, formula (IVa): 22-(X3)n-(X2)-Gly-Z1, and formula (Va): 22-(X3)n-D-Ser-Z3-21, preferably compound of formula (IIIfa). The GHS-R1A ligand compound of formula (II) comprises a structure of formula (VIa').

R1=alcohol, ether, hydrocarbon, hydrazine, peptide or peptidomimetic moiety;

R2=aromatic moiety;

R3, R5=H or CH3;

R4=aromatic, hydrophobic or amphiphilic moiety;

R6=spacer with length of 1-8 chemical bonds; and

R7=hydrogen bond donor such as NH2 or OH.

The GHS-R1A ligand compound of formula (I) is chosen from a compound of formula (IIb): 21-Gly-(X1)m-1-(X2)-(X3)n-22, formula (IIIfb):

21-Gly-Ser-(X2)-(X3)n-22, and formula (IVb): 21-Gly-(X2)-(X3)n-22,

preferably compound of formula (IIIfb). The GHS-R1A ligand compound of

formula (IV) is chosen from compound of formula (IIIfd): 21-betaAla-Ser-(X2)-

21-betaAla-(X2)-(X3)n-22, compound of formula (IVd): 21-GABA-(X2)-(X3)n-22, compound of

formula (Vd): 21-GABA-Ser-(X2)-(X3)n-22, compound of formula (VIId):

21-aminopentanoyl-Ser-(X2)-(X3)n-22, compound of formula (VIId):

21-HAA-Ser-(X2)-(X3)n-22, and compound of formula (IXd):

21-HAA-(X2)-(X3)n-22, in which 21 and 22 are optional protecting groups.

Preferred Composition: The composition further comprises transport

molecules such as liposomes, micelles, iscoms and/or microspheres.

Preferred Medicament: The medicament comprises the GHS-R1A ligand compound

or its salt as a lyophilisate, and the medicament further comprises a

solvent, where the lyophilisate and the solvent are in separate

compartments until administration. The medicament comprises a solution of

the GHS-R1A ligand compound or its salt. The solvent is saline.

L90 ANSWER 16 OF 18 WPIC COPYRIGHT 2007 THE THOMSON CORP ON STN

2006-317315 [33] WPIC

DOC. NO. CPI: C2006-104292 [33]

TITLE: Use of secretagogue compound in the preparation of

medicament for stimulation of appetite, food intake

and/or weight gain in transplantation patient

DERWENT CLASS: B04

INVENTOR:

LANGE B H; NIELSEN T G; SCHAMBYE H T;

PATENT ASSIGNEE: (GAST-N) GASTROTECH PHARMA AS

COUNTRY COUNT: 111

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG MAIN IPC

WO 2006045313 A2 20060504 (200633)\* EN 74[0]

EP 1812045 A2 20070801 (200753) EN

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2006045313 A2		WO 2005-DK688	20051026
EP 1812045 A2		EP 2005-796749	20051026
EP 1812045 A2		WO 2005-DK688	20051026

PATENT NO	KIND	PATENT NO
EP 1812045 A2	A2 Based on	WO 2006045313 A

## FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1812045 A2	A2 Based on	WO 2006045313 A

PRIORITY APPLIN. INFO: DK 2004-1658 20041027

INT. PATENT CLASSIF.:

IPC ORIGINAL: A61K0038-22 [I,A]; A61K0038-22 [I,C]; A61P0001-00 [I,C]; A61P0001-14 [I,A]; A61K0038-22 [I,C]; A61P0001-00 [I,C]

## BASIC ABSTRACT:

NO 2006045313 A2 UPAB: 20060523

NOVELTY - Use of a secretagogue compound in the preparation of a medicament for the stimulation of appetite, food intake and/or weight gain in a transplantation patient, is new. ACTIVITY - Anabolic. MECHANISM OF ACTION - None given.

USE - For the stimulation of appetite, food intake and/or weight gain in a transplantation (preferably lung, kidney, liver or heart transplantation) patient having a lean body mass of less than 80% (preferably less than 60%) of normal and/or a body mass index below 17 kg/m2 (claimed).

ADVANTAGE - The orexigenic and metabolic effects of secretagogues, such as ghrelin, reduce the morbidity and mortality in patients undergoing organ transplantation; and improve their quality of life. The medicament increases body fat mass and/or lean body mass. MANUAL CODE: CPI: B04-J01; B14-E11

## TECH

PHARMACEUTICALS - Preferred Compound: The secretagogue is

ghrelin or its salt; or a ghrelin-like compound comprising a

structure of formula 21-(X1)m-(X2)-(X3)n-22 (I) or its salt (preferably of

formula 21-Gly-Ser-(X2)-(X3)n-22 (III)).

X1 and 22 = an optionally present protecting group;

X1 = a naturally occurring and synthetic amino acid;

X2 = a naturally occurring and synthetic amino acid that is modified with

a bulky hydrophobic group (preferably acyl (preferably 1-35C acyl,

especially 8-11C acyl) or a fatty acid) (preferably modified Ser, Cys or

Lys, especially modified Ser);

X3 = a naturally occurring and synthetic amino acid (preferably 25 amino

acid sequences as given in the specification e.g. Phe-Leu-Ser-Pro-Glu-His-

Gln or Phe-Leu-Ser-Pro-Glu-His-Gln-Arg-Val-Gln-Gln-Arg-Lys-Glu-Ser-Lys-Lys-

Pro-Pro-Ala);

m = 1 - 10 (preferably 1 - 9, especially 2);

n = 0 - 35 (preferably 1 - 25, especially 1 - 10 or 15 - 24).

At least one of X1 and X3 may be modified with a bulky hydrophobic group

(preferably an acyl or a fatty acid).

Preferred Medicament: The medicament is in the form of a formulation that

comprises the secretagogue or its salt as a lyophilisate, and a solvent

(preferably saline) in separate compartments until administration. The

medicament is given until the lean body mass is more than 60% (preferably

more than 80%, especially more than 90%) of normal.

Preferred transplant: The transplant is a solid organ (preferably lung,

heart, liver, kidney, pancreas, intestine or an extremity); hematopoietic

stem cell transplantation (preferably bone marrow transplantation or

peripheral blood stem cell transplantation); or a reconstructive plastic

surgery, such as reconstructive facial surgery, or reconstructive surgery after burns.

L90 ANSWER 17 OF 18 WPX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: 2005-703468 [72] WPX  
DOC. NO. CPI: C2005-214152 [72]  
TITLE: Use of a secretagogue in combination with a growth hormone for the preparation of a medicament to treat or prevent e.g. cardiac cachexia, cancer cachexia and acquired immunodeficiency syndrome wasting

DERWENT CLASS: B04; B07  
INVENTOR: ISAKSSON O G P; LANGE B H; NIELSEN T G; POST C  
PATENT ASSIGNEE: (GAST-N) GASTROTECH PHARMA AS  
COUNTRY COUNT: 108

#### PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG	MAIN IPC
WO 2005097174	A2	20051020 (200572)*	EN	89	[0]	

#### APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2005097174	A2	WO 2005-DK22	20050407

PRIORITY APPLN. INFO: DK 2004-575 20040407

INT. PATENT CLASSIF.:

IPC RECLASSIF.: A61K0038-24 [I,A]; A61K0038-25 [I,A]; A61K0038-27 [I,A]; A61K0038-33 [I,C]; A61K0038-35 [I,A]

#### BASIC ABSTRACT:

WO 2005097174 A2 UPAB: 20051223  
NOVELTY - Use of a secretagogue (A) or its salts in combination with a growth hormone (B) or its salts for the preparation of a medicament.  
DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for: (1) a composition comprising (A) and (B) and/or their salts and carriers, vehicles and/or excipients; (2) a medical packaging comprising one or more dosage units of the composition; and  
(3) a method for monitoring the effect of a treatment of an individual with a secretagogue compound in combination with (B), comprising measuring the blood level in the individual of insulin like growth factor (IGF)-1, IGFBP-3 and/or ALS. ACTIVITY - Immunomodulator; Anti-HIV; Cardiant; Cytostatic; Antilipemic; Endocrine-Gen.; Anabolic.  
MECHANISM OF ACTION - Growth hormone secretagogue receptor la (GHS-Rla) ligand modulator. (A) was tested for its GHS-Rla ligand modulatory activity using biological assay. The results showed that the median effective concentration of (A) was less than 0.01 nM.  
USE - (A) In combination with (B) is useful for the preparation of a medicament to treat or prevent pathological conditions or the condition or frailty, where the condition is cachexia (where the cachexia is associated with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS) such as AIDS wasting) (cardiac cachexia, cancer cachexia (where the cancer is lung cancer, pancreatic cancer, liver cancer and a gastrointestinal tract cancers)) and lipodystrophy, stimulate appetite, food intake and weight gain, increase body fat mass and/or maintain lean body mass, treat dwarfism and/or growth retardation, that are caused by the individual having insufficient physiological levels of growth hormone (claimed).

ADVANTAGE - The combination of (A) and (B) has synergistic effect. MANUAL  
CPI: B04-B04D5; B04-C01G; B04-H01; B04-H06H; B04-J01;  
B04-J05; B04-N0200E; B11-C06; B11-C08E; B12-R04A;  
B12-M11E; B12-M11F; B14-E11B; B14-F01;  
B14-F06A; B14-G01B; B14-H01; B14-S02

CODE:

TECH

PHARMACEUTICALS - Preferred Method: Treatment of cancer comprises administration of (A) in combination with (B) and an anti-neoplastic treatment (a chemotherapy medicament and/or radiotherapy). Treatment of AIDS wasting, cardiac cachexia or the condition or frailty comprises administration of the composition in combination with a NSAID medicament.

Preferred Components: (B) Comprises a fully defined 748 amino acid (SEQ ID No: 4-8) sequence given in the specification. (B) Is a mammalian growth hormone, growth hormone of a domestic animal (preferably somatotropin or its any isoforms, thyroid stimulating hormone, adrenocorticotrophic hormone, leutinizing hormone and/or follicle stimulating hormone) or their homologs, variants or functional equivalents. (B) Comprises a recombinant polypeptide. (B) Is monomeric human growth hormone (hGH), dimeric hGH, trimeric hGH, tetrameric hGH, pentameric hGH, non-covalent oligomers of hGH, disulfide oligomers of hGH, covalently linked hGH, 22K-GHBP complex, 22K-alpha2-macroglobulin complex, hGH-v GHBP complex, hGH-22K, hGH-20K N-alpha-acetylated hGH-22K, Asn152-desamido-hGH-22K, Gln-137-desamido-hGH-22K, hGH-v or placental GH or Glyco-hGH-Vorglycosylated placental growth hormone. (A) Is ghrelin (human ghrelin), a ghrelin-like compound or their salts. The ghrelin-like compound comprises formulae of (Z1-(X1)m-(X2)-(X3)n-22 (I), 21-Gly-(X1)m-1-(X2)-(X3)n-22 (II), 21-Gly-Ser-(X2)-(X3)n-22 (III) (preferred) or 21-Gly-(X2)-(X3)n-22 (IV)).

Z1 = an optionally present protecting group;  
X1, X3 = an amino acid (naturally occurring and synthetic amino acids) (where the amino acid is modified with a bulky hydrophobic group, preferably an acyl group or a fatty acid) (preferably (X3)n comprises a sequence of (where (X3)n comprises a sequence of Phe-Leu-Ser-Pro-Glu-His-Gln, Phe-Leu-Ser-Pro-Glu-His, Phe-Leu-Ser-Pro-Glu, Phe-Leu-Ser-Pro, Phe-Leu-Ser, Phe-Leu or Phe);  
X2 = any amino acid from naturally occurring and synthetic amino acid (where the amino acid being modified with a bulky hydrophobic group (preferably an acyl group or a fatty acid) (preferably modified Ser, modified Cys or modified Lys);

Z2 = an optionally present protecting group;

m = 1-10 (preferably 2); and

n = 0 or 1-35 (preferably 15-24).

Where the acyl group is preferably 1-35C.

Preferred Composition: The medicament is in a formulation for subcutaneous, parenteral, nasal or pulmonary administration. The combination of (A) and (B) formulation is a lyophilizate, and the formulation further comprises a solvent (saline), where the lyophilizate and the solvent are in separate compartments until administration. The composition further comprises transport molecules, such as liposomes, micelles, iscos and/or microspheres. The medical packaging comprises 1-3 (preferably 3) dosage units or 7-21 (preferably 7, 14 or 21) dosage units. The medical packaging comprises instructions for administering the composition. The instructions includes instructions referring to administration of the composition during a meal or at the most 90 minutes prior to a meal, such as at the most 45 minutes prior to a meal, preferably immediately prior to a meal. The packaging is in the form of a cartridge, such as a cartridge for an injection pen.

L90 ANSWER 18 OF 18 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN  
 ACCESSION NUMBER: 2006106751 EMBASE Full-text  
 TITLE: Ghrelin receptor mutations - Too little height and too much hunger.

AUTHOR: Holst B.; Schwartz T.W.  
 CORPORATE SOURCE: T.W. Schwartz, Laboratory for Molecular Pharmacology, Panum Institute, University of Copenhagen, Blegdamsvej 3, Copenhagen, Denmark. schwartz@molpharm.dk  
 SOURCE: Journal of Clinical Investigation, (1 Mar 2006) Vol. 116, No. 3, pp. 637-641.

Refs: 19  
 ISSN: 0021-9738 E-ISSN: 1558-8238 CODEN: JCINAO  
 COUNTRY: United States  
 DOCUMENT TYPE: Journal; General Review  
 FILE SEGMENT: 003 Endocrinology  
 005 General Pathology and Pathological Anatomy  
 022 Human Genetics

LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 ENTRY DATE: Entered STN: 22 Mar 2006

Last Updated on STN: 22 Mar 2006

ABSTRACT: The ghrelin receptor is known from in vitro studies to signal in the absence of the hormone ghrelin at almost 50% of its maximal capacity. But, as for many other 7-transmembrane receptors, the in vivo importance of this ligand-independent signaling has remained unclear. In this issue of the JCI, Pantel et al. find that a natural mutation in the ghrelin receptor, Ala-204Glu, which is associated with a selective loss of constitutive activity without affecting ghrelin affinity, potency, or efficacy, segregates in 2 families with the development of short stature (see the related article beginning on page 760). By combination of the observations from this study with those related to the phenotype of subjects carrying another natural ghrelin receptor mutation, Phe279Leu, having identical molecular-pharmacological properties, it is proposed that selective lack of ghrelin receptor constitutive signaling leads to a syndrome characterized not only by short stature, but also by obesity that apparently develops during puberty.

CONTROLLED TERM: Medical Descriptors:  
 \*short stature: ET, etiology  
 \*obesity: ET, etiology  
 hormone action  
 hormone binding  
 phenotype  
 puberty  
 food intake  
 cross fertilization  
 genetic analysis  
 structure activity relation  
 physiology  
 energy expenditure  
 developmental disorder: ET, etiology  
 body growth  
 gene mutation  
 amino acid substitution  
 hormone release  
 heterozygosity  
 ligand binding

# CONTROLLED TERM:

human  
 review  
 priority journal  
 Drug Descriptors:  
 \*hormone receptor: EC, endogenous compound  
 \*ghrelin receptor: EC, endogenous compound  
 ghrelin: EC, endogenous compound  
 G protein coupled receptor: EC, endogenous compound  
 appetite stimulant: EC, endogenous compound  
 unclassified drug  
 (ghrelin) 258279-04-8, 304853-26-7

CAS REGISTRY NO.:

## TEXT SEARCH

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L7 1 SEA FILE=REGISTRY ABB=ON 304853-26-7  
 L8 75 SEA FILE=CAPLUS ABB=ON L7/D  
 L9 3047 SEA FILE=CAPLUS ABB=ON CACHEXIA/OBI  
 L10 1571 SEA FILE=CAPLUS ABB=ON WASTING/OBI  
 L11 20291 SEA FILE=CAPLUS ABB=ON APPETITE/OBI  
 L12 5750 SEA FILE=CAPLUS ABB=ON MALNUTRITION/OBI  
 L14 497406 SEA FILE=CAPLUS ABB=ON NEOPLAS?/OBI  
 L17 29 SEA FILE=CAPLUS ABB=ON L8 (L) (THU OR PAC OR PKT OR DMA)/RL  
 L19 27682 SEA FILE=CAPLUS ABB=ON BODY WEIGHT/CT  
 L20 35 SEA FILE=CAPLUS ABB=ON L8 AND ((L9 OR L10 OR L11 OR L12 OR L19) OR (L17 AND L14))

=> s 120 not 122

L95 30 L20 NOT L22

=> fil medl; d que 142; d que 149; d que 151; d que 154; d que 159

FILE 'MEDLINE' ENTERED AT 14:52:07 ON 20 SEP 2007

FILE LAST UPDATED: 19 Sep 2007 (20070919/UP). FILE COVERS 1950 TO DATE.

This file contains CAS Registry Numbers for easy and accurate substance identification.

L28 2304 SEA FILE=MEDLINE ABB=ON GHRELIN  
 L30 2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT  
 L32 2754 SEA FILE=MEDLINE ABB=ON CACHEXIA/CT  
 L39 526 SEA FILE=MEDLINE ABB=ON L30(L) (AD OR PD OR TU OR PK)/CT

L42 13 SEA FILE=MEDLINE ABB=ON L39 AND L32 AND L28

L28 2304 SEA FILE=MEDLINE ABB=ON GHRELIN  
 L30 2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT  
 L33 553 SEA FILE=MEDLINE ABB=ON WASTING SYNDROME/CT  
 L49 1 SEA FILE=MEDLINE ABB=ON L28 AND L30 AND L33

L28 2304 SEA FILE=MEDLINE ABB=ON GHRELIN  
 L30 2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT  
 L35 8287 SEA FILE=MEDLINE ABB=ON EATING/CT(L) DE/CT  
 L36 4131 SEA FILE=MEDLINE ABB=ON APPETITE/CT  
 L39 526 SEA FILE=MEDLINE ABB=ON L30(L) (AD OR PD OR TU OR PK)/CT  
 L44 351 SEA FILE=MEDLINE ABB=ON L39/NAJ  
 L45 318 SEA FILE=MEDLINE ABB=ON L44 AND L28  
 L50 748646 SEA FILE=MEDLINE ABB=ON NEOPLASMS+NT/CT(L) TH./CT  
 L51 1 SEA FILE=MEDLINE ABB=ON (L35 OR L36) AND L45 AND L50

L28 2304 SEA FILE=MEDLINE ABB=ON GHRELIN  
 L32 2754 SEA FILE=MEDLINE ABB=ON CACHEXIA/CT  
 L33 553 SEA FILE=MEDLINE ABB=ON WASTING SYNDROME/CT  
 L35 8287 SEA FILE=MEDLINE ABB=ON EATING/CT(L) DE/CT  
 L36 4131 SEA FILE=MEDLINE ABB=ON APPETITE/CT  
 L53 19 SEA FILE=MEDLINE ABB=ON L28(W) LIKE  
 L54 1 SEA FILE=MEDLINE ABB=ON L53 AND (L32 OR L33 OR L35 OR L36)

L28 2304 SEA FILE=MEDLINE ABB=ON GHRELIN  
 L30 2202 SEA FILE=MEDLINE ABB=ON PEPTIDE HORMONES/CT  
 L32 2754 SEA FILE=MEDLINE ABB=ON CACHEXIA/CT  
 L33 553 SEA FILE=MEDLINE ABB=ON WASTING SYNDROME/CT  
 L35 8287 SEA FILE=MEDLINE ABB=ON EATING/CT(L) DE/CT  
 L36 4131 SEA FILE=MEDLINE ABB=ON APPETITE/CT  
 L52 725074 SEA FILE=MEDLINE ABB=ON ANALOG? OR SECRETAGOG? OR DERIVATI?  
 L59 6 SEA FILE=MEDLINE ABB=ON L28(LA) L52 AND L30 AND (L32 OR L33 OR L35 OR L36)

=> s 142,149,151,154,159 not 143

L96 21 (L42 OR L49 OR L51 OR L54 OR L59) NOT L43

=> fil embase; d que 161; d que 170; d que 173

FILE 'EMBASE' ENTERED AT 14:52:09 ON 20 SEP 2007

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FILE COVERS 1974 TO 20 Sep 2007 (20070920/ED)

EMBASE is now updated daily. SDI frequency remains weekly (default) and biweekly.

This file contains CAS Registry Numbers for easy and accurate substance identification.

L61 7 SEA FILE=EMBASE ABB=ON GHRELIN DERIVATIVE/CT

L60 2434 SEA FILE=EMBASE ABB=ON GHRELIN/CT  
L66 14 SEA FILE=EMBASE ABB=ON CANCER CACHEXIA/CT  
SYNDROME/CT  
L70 3 SEA FILE=EMBASE ABB=ON L66 AND L60

L60 2434 SEA FILE=EMBASE ABB=ON GHRELIN/CT  
L67 3660 SEA FILE=EMBASE ABB=ON CACHEXIA/CT  
L69 459 SEA FILE=EMBASE ABB=ON L60(L) (AD OR DT OR PK OR DO OR PD)/CT  
L71 721 SEA FILE=EMBASE ABB=ON L67(L) (DT OR PC)/CT  
L73 8 SEA FILE=EMBASE ABB=ON L69/MAJ AND L71/MAJ

=> s l61,l70,l73 not l65

L97 17 (L61 OR L70 OR L73) NOT L65

=> fil wpix; d que l85

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>>> IPC Reform backfile reclassification has been loaded to 31 May 2007. No update date (UP) has been created for the reclassified documents, but they can be identified by 20060101/UPIC and 20061231/UPIC and 20060601/UPIC. <<<

>>> Indian patent publication number format enhanced in DWPI - see NEWS <<<

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'BI ABEX' IS DEFAULT SEARCH FIELD FOR 'WPX' FILE

L79 3107 SEA FILE=WPX ABB=ON CACHEXIA/BI.ABEX OR CACHECTIC?/BI.ABEX  
L80 570 SEA FILE=WPX ABB=ON B14-ELIB/MC OR C14-ELIB/MC  
L81 212 SEA FILE=WPX ABB=ON GHRELIN/BI.ABEX  
L82 542701 SEA FILE=WPX ABB=ON ANALOG?/BI.ABEX OR SECRETAGOG?/BI.ABEX  
OR DERIVATI?/BI.ABEX

L84 23 SEA FILE=WPX ABB=ON L81(LA) L82  
L85 10 SEA FILE=WPX ABB=ON L84 AND (L79 OR L80)

=> s l85 not l88

L98 7 L85 NOT L88

=> => dup rem 196,195,198,197  
FILE 'MEDLINE' ENTERED AT 14:52:46 ON 20 SEP 2007

FILE 'CAPLUS' ENTERED AT 14:52:46 ON 20 SEP 2007  
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PROCESSING COMPLETED FOR L96  
PROCESSING COMPLETED FOR L95  
PROCESSING COMPLETED FOR L98  
PROCESSING COMPLETED FOR L97  
L99 66 DUP REM L96 L95 L98 L97 (9 DUPLICATES REMOVED)  
ANSWERS '1-21' FROM FILE MEDLINE  
ANSWERS '22-51' FROM FILE CAPLUS  
ANSWERS '52-55' FROM FILE WPX  
ANSWERS '56-66' FROM FILE EMBASE

=> d iall 1-21; d ibib ab hitind 22-51; d iall abeq tech 52-55; d iall 56-66; fil hom

L99 ANSWER 1 OF 66 MEDLINE on STN DUPLICATE 1  
ACCESSION NUMBER: 2007294994 MEDLINE Full-text  
DOCUMENT NUMBER: Pubmed ID: 17347304  
TITLE: Ghrelin treatment causes increased food intake and retention of lean body mass in a rat model of cancer cachexia.  
AUTHOR: DeBoer Mark D; Zhu Xin Xia; Levasseur Peter; Meguid Michael M; Suzuki Susumu; Inui Akio; Taylor John E; Hailem Heather A; Dong Jesse Z; Datta Rakesh; Culler Michael D; Marks Daniel L  
CORPORATE SOURCE: Center for the Study of Weight Regulation, Oregon Health and Science University, 707 SW Gaines Road, Portland, OR 97239, USA.  
CONTRACT NUMBER: 1K08 DK 062207-01 (NIDDK)  
DK/NCI 43796/70239  
F32 DK 072820-01A1 (NIDDK)  
R01 DK 70333-01 (NIDDK)  
SOURCE: Endocrinology, (2007 Jun) Vol. 148, No. 6, pp. 3004-12. Electronic Publication: 2007-03-08. Journal code: 0375040. ISSN: 0013-7227.  
PUB. COUNTRY: United States  
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, N.I.H., EXTRAMURAL) (RESEARCH SUPPORT, NON-U.S. GOV'T) English  
LANGUAGE: English  
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200707  
 ENTRY DATE: Last Updated on STN: 18 May 2007  
 Entered Medline: 24 Jul 2007

ABSTRACT:  
 Cancer cachexia is a debilitating syndrome of anorexia and loss of lean body mass that accompanies many malignancies. Ghrelin is an orexigenic hormone with a short half-life that has been shown to improve food intake and weight gain in human and animal subjects with cancer cachexia. We used a rat model of cancer cachexia and administered human ghrelin and a synthetic ghrelin analog BIM-28131 via continuous infusion using osmotic minipumps. Tumor-implanted rats receiving human \*\*\*ghrelin\*\*\* or BIM-28131 exhibited a significant increase in food consumption and weight gain vs. saline-treated animals. We used dual-energy x-ray absorptiometry scans to show that the increased weight was due to maintenance of lean mass vs. a loss of lean mass in saline-treated animals. Also, BIM-28131 significantly limited the loss of fat mass normally observed in tumor-implanted rats. We further performed real-time PCR analysis of the hypothalamus and brainstems and found that ghrelin-treated animals exhibited a significant increase in expression of orexigenic peptides agouti-related peptide and neuropeptide Y in the hypothalamus and a significant decrease in the expression of IL-1 receptor-I transcript in the hypothalamus and brainstem. We conclude that ghrelin and a synthetic \*\*\*ghrelin\*\*\* receptor agonist improve weight gain and lean body mass retention via effects involving orexigenic neuropeptides and antiinflammatory changes.

CONTROLLED TERM: Check Tags: Male  
 Animals

\*Body Composition: DE, drug effects  
 \*Body Weight: DE, drug effects  
 \*Cachexia: ET, etiology  
 \*Cachexia: PA, pathology  
 Disease Models, Animal  
 \*Eating: DE, drug effects  
 Gene Expression Regulation, Neoplastic: DE, drug effects  
 Growth Hormone: ME, metabolism  
 Hypothalamus: DE, drug effects  
 Hypothalamus: ME, metabolism  
 Insulin-Like Growth Factor I: ME, metabolism  
 \*Neoplasms: CO, complications  
 Neoplasms: PA, pathology  
 \*Peptide Hormones: PD, pharmacology  
 Rats  
 Rats, Inbred F344  
 Tumor Burden: DE, drug effects  
 67763-96-6 (Insulin-Like Growth Factor I): 9002-72-6  
 (Growth Hormone)  
 0 (Peptide Hormones): 0 (ghrelin)

CAS REGISTRY NO.: 67763-96-6 (Insulin-Like Growth Factor I): 9002-72-6  
 (Growth Hormone)  
 0 (Peptide Hormones): 0 (ghrelin)

CHEMICAL NAME: 0 (Peptide Hormones): 0 (ghrelin)

L99 ANSWER 2 OF 66 MEDLINE on STN MEDLINE Full-text  
 ACCESSION NUMBER: 2007309573  
 DOCUMENT NUMBER: PubMed ID: 17414495  
 TITLE: Emerging results of anticatabolic therapy with ghrelin.

AUTHOR: Akamizu Takashi; Kangawa Kenji  
 CORPORATE SOURCE: Ghrelin Research Project, Department of Experimental Therapeutics, Translational Research Center, Kyoto University Hospital, 54 Shogoin-Kawahara-cho, Sakyo-ku, Kyoto 606-8507, Japan.. akamizu@kuhp.kyoto-u.ac.jp  
 SOURCE: Current opinion in clinical nutrition and metabolic care,

(2007 May) Vol. 10, No. 3, pp. 278-83. Ref: 58  
 Journal code: 9804399. ISSN: 1363-1950.  
 England: United Kingdom

PUB. COUNTRY:  
 DOCUMENT TYPE:

JOURNAL: Article: (JOURNAL ARTICLE)  
 (RESEARCH SUPPORT, NON-U.S. GOV'T)  
 General Review: (REVIEW)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200706

ENTRY DATE: Entered STN: 25 May 2007

Last Updated on STN: 26 Jun 2007

Entered Medline: 25 Jun 2007

ABSTRACT:

PURPOSE OF REVIEW: This review summarizes recent developments in research into anticatabolic therapies with ghrelin. Potential conditions in which \*\*\*ghrelin\*\*\* treatment may be useful include cachexia, anorexia and ageing. We highlight a number of intriguing basic topics related to the anticatabolic effects of ghrelin. RECENT FINDING: Repeated administration of \*\*\*ghrelin\*\*\* to patients with congestive heart failure or chronic obstructive pulmonary disease improved appetite, body composition, muscle wasting and functional capacity in open-label pilot studies. An acute, randomized, placebo-controlled, crossover clinical trial of cancer patients with anorexia revealed marked increases in energy intake following treatment. The effects of ghrelin treatment in patients with anorexia nervosa are controversial. Basic research studies have extended our understanding of the upstream regulation of neuropeptide Y/agouti-related protein signalling and the central control of adipocyte metabolism. In addition, alterations in fat-free mass may play a role in ghrelin regulation. SUMMARY: A number of studies are currently evaluating the anticatabolic effects of \*\*\*ghrelin\*\*\* in the treatment of various diseases, including cachexia, anorexia and age-related disorders. These studies will hopefully lead to the development of novel clinical applications for ghrelin treatment. These studies have also facilitated a better understanding of the molecular basis of the anticatabolic effects of ghrelin.

CONTROLLED TERM: Aging

\*Anorexia: DT, drug therapy  
 Appetite: DE, drug effects  
 \*Cachexia: DT, drug therapy  
 Data Collection  
 \*Energy Intake: DE, drug effects  
 \*Energy Metabolism: DE, drug effects  
 Humans  
 \*Peptide Hormones: TU, therapeutic use  
 0 (Peptide Hormones): 0 (ghrelin)

L99 ANSWER 3 OF 66 MEDLINE on STN MEDLINE Full-text  
 ACCESSION NUMBER: 2006120902  
 DOCUMENT NUMBER: PubMed ID: 16508225  
 TITLE: Ghrelin, a novel growth hormone-releasing peptide, in the treatment of cardiopulmonary-associated cachexia.

AUTHOR: Nagaya Noritoshi; Kojima Masakazu; Kangawa Kenji  
 CORPORATE SOURCE: Department of Regenerative Medicine and Tissue Engineering, National Cardiovascular Center Research Institute, Osaka. Internal medicine (Tokyo, Japan), (2006) Vol. 45, No. 3  
 SOURCE: pp. 127-34. Electronic Publication: 2006-03-01. Ref: 83  
 COMMENT: Journal code: 9204241. E-ISSN: 1349-7235.  
 Comment in: Intern Med. 2006;45(13):837. PubMed ID: 16880713  
 PUB. COUNTRY: Japan



DOCUMENT TYPE: Journal; Article: (JOURNAL ARTICLE)  
 General Review: (REVIEW)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 200608  
 ENTRY DATE: Entered STN: 2 Mar 2006  
 Last Updated on STN: 23 Aug 2006  
 Entered Medline: 22 Aug 2006

## ABSTRACT:

Ghrelin is a novel growth hormone (GH)-releasing peptide, isolated from the stomach, which has been identified as an endogenous ligand for GH secretagogue receptor. The discovery of ghrelin indicates that the release of GH from the pituitary might be regulated not only by hypothalamic GH-releasing hormone, but also by ghrelin derived from the stomach. This peptide also stimulates food intake and induces adiposity through GH-independent mechanisms. In addition, ghrelin acts directly on the central nervous system to decrease sympathetic nerve activity. Thus, \*\*\*ghrelin\*\*\* plays important roles for maintaining GH release and energy homeostasis. Repeated administration of ghrelin improves body composition, muscle wasting, functional capacity, and sympathetic augmentation in cachectic patients with heart failure or chronic obstructive pulmonary disease. These results suggest that ghrelin has anti-cachectic effects through GH-dependent and independent mechanisms. Thus, administration of ghrelin may be a new therapeutic strategy for the treatment of cardiopulmonary-associated cachexia.

## CONTROLLED TERM:

Animals  
 \*Cachexia: DT, drug therapy  
 Cachexia: ET, etiology  
 \*Growth Hormone: TU, therapeutic use  
 \*Heart Failure, Congestive: CO, complications  
 Heart Failure, Congestive: PP, physiopathology  
 Humans

Peptide Hormones: PD, pharmacology  
 Peptide Hormones: PH, physiology

\*Peptide Hormones: TU, therapeutic use

\*Pulmonary Disease, Chronic Obstructive: CO, complications  
 Pulmonary Disease, Chronic Obstructive: PP, physiopathology

Stomach: ME, metabolism

CAS REGISTRY NO.: 9002-72-6 (Growth Hormone)  
 CHEMICAL NAME: 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 4 OF 66 MEDLINE on STN DUPLICATE 5

2005491621 MEDLINE Full-text

PubMed ID: 16162705

TITLE: Treatment of cachexia with ghrelin in patients with COPD.

AUTHOR: Nagaya Noritoshi; Itoh Takafumi; Murakami Shinsuke; Oya Hideo; Uematsu Masaaki; Miyatake Kunio; Kangawa Kenji  
 Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka 565-8565, Japan..  
 mnagaya@ri.ncvc.go.jp

Chest, (2005 Sep) Vol. 128, No. 3, pp. 1187-93.

Journal code: 021335. ISSN: 0012-3692.

COMMENT: Comment in: Chest. 2005 Sep;128(3):1084-6. PubMed ID: 16162686

United States

PUB. COUNTRY: Journal; Article: (JOURNAL ARTICLE)

DOCUMENT TYPE: (RESEARCH SUPPORT, NON-U.S. GOV'T)

English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
 ENTRY MONTH: 200511  
 ENTRY DATE: Entered STN: 16 Sep 2005  
 Last Updated on STN: 9 Nov 2005  
 Entered Medline: 8 Nov 2005

## ABSTRACT:

STUDY OBJECTIVES: Ghrelin is a novel growth hormone (GH)-releasing peptide that also induces a positive energy balance by decreasing fat utility and stimulating feeding through GH-independent mechanisms. We investigated whether ghrelin improves cachexia and functional capacity in patients with COPD. METHODS: This is an open-label pilot study. Human ghrelin (2 microg/kg bid) was IV administered to seven cachectic patients with COPD for 3 weeks. Food intake, body composition, muscle strength, exercise capacity, pulmonary function, and sympathetic nerve activity were examined before and after ghrelin therapy. RESULTS: A single administration of \*\*\*ghrelin\*\*\* markedly increased serum GH (21-fold). Three-week treatment with ghrelin resulted in a significant increase in mean (+/- SEM) body weight (49.3 +/- 3.6 to 50.3 +/- 3.8 kg; p < 0.05). Food intake was significantly increased during ghrelin therapy. Ghrelin increased lean body mass and peripheral and respiratory muscle strength. \*\*\*Ghrelin\*\*\* significantly increased K r nsky performance status score and the distance walked in 6 min (370 +/- 30 to 432 +/- 35 m; p < 0.05), although it did not significantly alter pulmonary function. Ghrelin attenuated the exaggerated sympathetic nerve activity, as indicated by a marked decrease in plasma norepinephrine level (889 +/- 123 to 597 +/- 116 pg/mL; p < 0.05). CONCLUSIONS: These preliminary results suggest that repeated administration of ghrelin improves body composition, muscle wasting, functional capacity, and sympathetic augmentation in cachectic patients with COPD.

## CONTROLLED TERM:

Check Tags: Female; Male

Aged

Aged, 80 and over

Body Composition: DE, drug effects

\*Cachexia: DT, drug therapy

Cachexia: ET, etiology

Exercise Tolerance: DE, drug effects

Growth Hormone-Releasing Hormone: PD, pharmacology

\*Growth Hormone-Releasing Hormone: TU, therapeutic use

Humans

Muscle Weakness: DT, drug therapy

Muscular Atrophy: DT, drug therapy

Peptide Hormones: PD, pharmacology

\*Peptide Hormones: TU, therapeutic use

Pilot Projects

\*Pulmonary Disease, Chronic Obstructive: CO, complications

Recovery of Function: DE, drug effects

Respiratory Function Tests

Respiratory System: DE, drug effects

Sympathetic Nervous System: DE, drug effects

9034-39-3 (Growth Hormone-Releasing Hormone)

0 (Peptide Hormones); 0 (ghrelin)

CAS REGISTRY NO.:

CHEMICAL NAME:

L99 ANSWER 5 OF 66

2003164275 MEDLINE Full-text

PubMed ID: 12681236

DOCUMENT NUMBER:

TITLE:

Ghrelin improves left ventricular dysfunction and

cardiac cachexia in heart failure.

Nagaya Noritoshi; Kangawa Kenji

Department of Internal Medicine, National Cardiovascular

Center, 5-7-1 Fujishirodai, Suita, Osaka, 565-8565, Japan..

SOURCE: nagayam@hsp.ncvc.go.jp  
Current opinion in pharmacology, (2003 Apr) Vol. 3, No. 2, ;  
pp. 146-51. Ref: 55  
Journal code: 100966133. ISSN: 1471-4892.  
England: United Kingdom  
JOURNAL: Article; (JOURNAL ARTICLE)  
(RESEARCH SUPPORT, NON-U.S. GOV'T)  
General Review: (REVIEW)  
English  
Priority Journals  
200308  
FILE SEGMENT:  
ENTRY MONTH:  
ENTRY DATE:  
Last Updated on STN: 28 Aug 2003  
Entered Medline: 27 Aug 2003

ABSTRACT: Ghrelin is a novel growth-hormone-releasing peptide isolated from the stomach that has been identified as an endogenous ligand for the growth-hormone secretagogue receptor. This peptide results in a positive energy balance by stimulating food intake and inducing adiposity through growth-hormone-independent mechanisms. In addition, ghrelin has several cardiovascular effects, as indicated by the presence of its receptor in blood vessels and ventricles of the heart. Infusion of ghrelin decreases systemic vascular resistance and increases cardiac output in patients with heart failure. Furthermore, repeated administration of ghrelin improves cardiac structure and function, and attenuates the development of cardiac cachexia in rats with heart failure. These results suggest that \*\*ghrelin\*\* has therapeutic potential in the treatment of severe chronic heart failure.

## CONTROLLED TERM:

Animals  
Cachexia: BL, blood  
\*Cachexia: DT, drug therapy  
Heart Failure, Congestive: BL, blood  
\*Heart Failure, Congestive: DT, drug therapy  
Humans  
Peptide Hormones: BL, blood  
Peptide Hormones: SE, secretion  
\*Peptide Hormones: TU, therapeutic use  
Ventricular Dysfunction, Left: BL, blood  
\*Ventricular Dysfunction, Left: DT, drug therapy  
0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 6 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2007011711 MEDLINE Full-text  
DOCUMENT NUMBER: PubMed ID: 17030099  
TITLE: Ghrelin may reduce radiation-induced mucositis and anorexia in head-neck cancer.  
AUTHOR: Guney Yildiz; Ozel Turku Ummuhan; Hicsonmez Ayse; Nalca Andrieu Meitem; Kurtman Cengiz  
CORPORATE SOURCE: Department of Radiation Oncology, Ankara University School of Medicine, Cebeci Hospital, Dikimevi, Ankara 06590, Turkey.; yildiz\_guney@yahoo.com  
SOURCE: Medical hypotheses, (2007) Vol. 68, No. 3, pp. 538-40. Electronic Publication: 2006-10-09. Journal code: 7505668. ISSN: 0306-9877.  
PUB. COUNTRY: Scotland: United Kingdom  
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200704  
ENTRY DATE: Entered STN: 9 Jan 2007

Last Updated on STN: 6 Apr 2007  
Entered Medline: 5 Apr 2007

## ABSTRACT:

Body weight loss is common in cancer patients, and is often associated with poor prognosis, it greatly impairs quality of life (QOL). Radiation therapy (RT) is used in head and neck cancers (HNC) either as a primary treatment or as an adjuvant therapy to surgery. Patients with HNC are most susceptible to malnutrition especially due to anorexia, which is aggravated by RT. Multiple pro-inflammatory cytokines, such as interleukin-6 (IL-6), interleukin-beta (IL-beta), interferon (IFN)-gamma and tumor necrosis factor-alpha (TNF-alpha), have been all associated with the development of both anorexia and oral mucositis. Radiation-induced mucositis occurs in almost all patients, who are treated for HNC, it could also cause weight loss. Ghrelin is a novel 28-amino acid peptide, which up-regulates body weight through appetite control, increase food intake, down-regulate energy expenditure and induces adiposity. Furthermore, ghrelin inhibits pro-inflammatory cytokines such as IL-1alpha, IL-beta, TNF-alpha which may cause oral mucositis and anorexia, which are the results of weight loss. Thus weight loss during RT is an early indicator of nutritional decline, we propose that recombinant ghrelin used prophylactically could be useful as an appetite stimulant, and preventive of mucositis because of its anti-inflammatory effect, it might help patients maintain weight over the course of curative RT of the HNC and can improve specific aspects of QOL. This issue warrants further studies.

## CONTROLLED TERM:

Anorexia: PC, prevention & control  
\*Anorexia: RT, radionuclide imaging  
Appetite  
Head and Neck Neoplasms: PP, physiopathology  
\*Head and Neck Neoplasms: RT, radiotherapy  
Humans  
Mucositis: DT, drug therapy  
\*Mucositis: RT, radionuclide imaging  
\*Peptide Hormones: TU, therapeutic use  
\*Radiotherapy: AE, adverse effects  
0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 7 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2006463117 MEDLINE Full-text  
DOCUMENT NUMBER: PubMed ID: 16880713  
TITLE: Ghrelin and neurohumoral antagonists in the treatment of cachexia associated with cardiopulmonary disease.  
AUTHOR: Lainscak Mitja; Andreas Stefan; Scanlon Paul D; Somers Virend K; Anker Stefan D  
SOURCE: Internal medicine (Tokyo, Japan), (2006) Vol. 45, No. 13, pp. 837. Electronic Publication: 2006-08-01. Journal code: 9204241. E-ISSN: 1349-7235.  
COMMENT: Comment on: Intern Med. 2006 Mar;45(3):127-34. PubMed ID: 16508225  
PUB. COUNTRY: Japan  
DOCUMENT TYPE: Commentary  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200609  
ENTRY DATE: Entered STN: 5 Aug 2006  
Last Updated on STN: 16 Sep 2006  
Entered Medline: 15 Sep 2006  
\*Cachexia: DT, drug therapy  
Cachexia: ET, etiology  
Heart Failure, Congestive: CO, complications

Humans  
 \*Peptide Hormones: TU, therapeutic use  
 Pulmonary Disease, Chronic Obstructive: CO, complications  
 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 8 OF 66 MEDLINE on STN  
 ACCESSION NUMBER: 2006260324 MEDLINE Full-text  
 DOCUMENT NUMBER: PubMed ID: 16685441  
 TITLE: Effects of ghrelin on anorexia in tumor-bearing mice with eicosanoid-related cachexia.  
 AUTHOR: Wang Wennu; Andersson Marianne; Iresjo Britt-Marie; Lonnroth Christina; Lundholm Kent  
 CORPORATE SOURCE: Surgical Metabolic Research Laboratory at Lundberg Laboratory for Cancer Research, Department of Surgery, Sahlgrenska University Hospital, Goteborg University, Goteborg, Sweden.  
 SOURCE: International journal of oncology. (2006 Jun) Vol. 28, No. 6, pp. 1393-400.  
 Journal code: 9306042. ISSN: 1019-6439.  
 Greece  
 Journal: Article; (JOURNAL ARTICLE)  
 DOCUMENT TYPE: (RESEARCH SUPPORT, NON-U.S. GOV'T)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 200608  
 ENTRY DATE: Entered STN: 11 May 2006  
 Last Updated on STN: 17 Aug 2006  
 Entered Medline: 16 Aug 2006

**ABSTRACT:**  
 Ghrelin is a novel brain-gut peptide that stimulates food intake and may secondarily increase body weight via a growth hormone secretagogue receptor (GHS-R). Tumor-bearing mice (MCG101), characterized by anorexia, fat loss and muscle wasting due to increased concentration of PGE2 and proinflammatory cytokines (IL-1beta, IL-6, TNF-alpha), were provided ghrelin i.p. at a low (20 microg/day) and high dose (40 microg/day) to examine the ability of \*\*\*ghrelin\*\*\* to counteract tumor-induced anorexia. Immunohistochemical staining and Western blot analyses were used to identify GHS-R expression in the brain as well as its relationship to NPY expression in hypothalamic neurons. GHS-R mRNA in hypothalamus and ghrelin mRNA in gastric fundus were quantified by RT-PCR. Body composition was determined by carcass extractions. GHS-R expression in hypothalamus and plasma ghrelin levels were significantly increased in freely-fed tumor-bearing mice, while gastric fundus expression of ghrelin was unaltered compared to non-tumor-bearing mice (controls). Ghrelin treatment increased food intake, body weight and whole body fat at both low and high doses of \*\*\*ghrelin\*\*\*. In normal controls, while tumor-bearing mice showed improved intake and body composition at the high dose of ghrelin only. Exogenous ghrelin normalized the GHS-R expression in hypothalamus from tumor-bearing mice without alterations in the gastric fundus expression of \*\*\*ghrelin\*\*\*. Tumor growth was not altered by exogenous ghrelin. Our results indicate that MCG 101-bearing mice became ghrelin resistant despite upregulation of hypothalamic GHS-R expression, which confirms similar indirect observations in cancer patients. Thus, other factors downstream of the ghrelin-GHS-R system appear to be more important than ghrelin to explain cancer-induced anorexia.

**CONTROLLED TERM:** Check Tags: Female  
 Animals  
 \*Anorexia: DT, drug therapy  
 Anorexia: ET, etiology  
 \*Cachexia: DT, drug therapy

Cachexia: ET, etiology  
 \*Eicosanoids: AE, adverse effects  
 Energy Intake  
 Growth Hormone: TU, therapeutic use  
 Mice  
 Mice, Inbred C57BL  
 \*Peptide Hormones: TU, therapeutic use  
 RNA, Messenger: GE, genetics  
 Receptors, G-Protein-Coupled: GE, genetics  
 Reverse Transcriptase Polymerase Chain Reaction  
 Sarcoma, Experimental: CO, complications  
 \*Sarcoma, Experimental: PA, pathology  
 9002-72-6 (Growth Hormone)  
 CAS REGISTRY NO.: 0 (Eicosanoids); 0 (Peptide Hormones); 0 (RNA, Messenger); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)

L99 ANSWER 9 OF 66 MEDLINE on STN  
 ACCESSION NUMBER: 2006638415 MEDLINE Full-text  
 DOCUMENT NUMBER: PubMed ID: 16873986  
 TITLE: Translational research on the clinical applications of ghrelin.  
 AUTHOR: Akamizu Takashi; Kangawa Kenji  
 CORPORATE SOURCE: Ghrelin Research Project, Department of Experimental Therapeutics, Translational Research Center, Kyoto University Hospital, Kyoto University School of Medicine, Kyoto, Japan.  
 SOURCE: Endocrine journal. (2006 Oct) Vol. 53, No. 5, pp. 585-91.  
 Electronic Publication: 2006-07-28. Ref: 52  
 Journal code: 9313485. ISSN: 0918-8959.  
 Japan  
 Journal: Article; (JOURNAL ARTICLE)  
 DOCUMENT TYPE: (RESEARCH SUPPORT, NON-U.S. GOV'T)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 200704  
 ENTRY DATE: Entered STN: 1 Nov 2006  
 Last Updated on STN: 3 Apr 2007  
 Entered Medline: 2 Apr 2007

**CONTROLLED TERM:**  
 Cachexia: DT, drug therapy  
 \*Clinical Trials  
 Clinical Trials, Phase I  
 Clinical Trials, Phase II  
 Dwarfism, Pituitary: DT, drug therapy  
 Eating Disorders: DT, drug therapy  
 Humans  
 Models, Biological  
 Peptide Hormones: PH, physiology  
 \*Peptide Hormones: TU, therapeutic use  
 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 10 OF 66 MEDLINE on STN  
 ACCESSION NUMBER: 2006151694 MEDLINE Full-text  
 DOCUMENT NUMBER: PubMed ID: 16541004  
 TITLE: Role of ghrelin in the regulation of appetite in children.  
 AUTHOR: Savastio S; Bellone S; Baldelli R; Ferraris M; Lapidari A; Zanetta F; Sogni S; Petri A; Bona G  
 CORPORATE SOURCE: Division of Pediatrics, Department of Medical Sciences,

University of Piemonte Orientale, A. Avogadro, Novara, Italy.  
Minerva pediatrica, (2006 Feb) Vol. 58, No. 1, pp. 21-6.  
Ref: 47

JOURNAL CODE: 0400740. ISSN: 0026-4946.

PUB. COUNTRY:

DOCUMENT TYPE:

LANGUAGE:

FILE SEGMENT:

ENTRY MONTH:

ENTRY DATE:

Entered STN: 17 Mar 2006

Last Updated on STN: 2 Aug 2006

Entered Medline: 1 Aug 2006

ABSTRACT:

Ghrelin, the new recently discovered hormone, is a 28 amino-acid acylated peptide predominantly produced by the stomach characterized by a strong GH-releasing activity mediated by the hypothalamic-pituitary GH secretagogues (GHS) receptors. Ghrelin and GHSs, acting on central and peripheral receptors, exert other actions such as stimulation of ACTH and prolactin secretion, influence on insulin secretion and glucose metabolism, orexigenic effect and modulatory activity on the neuroendocrine and metabolic response to starvation, influence on exocrine gastro-entero-pancreatic functions, cardiovascular activities and modulation of cell proliferation and apoptosis. The wide spectrum of ghrelin action requires further studies to provide critical information on the role of ghrelin and the potential perspectives of its analogues in the clinical practice. This point is of particular interest in the field of pediatric endocrinology and metabolism because the ghrelin story started focusing on GH deficiency and is now extending to aspects that once again are of major relevance such as obesity and eating disorders, regulation of the hypothalamus-pituitary-adrenal and gonadal axis. More studies are needed to evaluate the real impact of ghrelin in different non endocrine processes and the possible use of ghrelin analogues in different diseases condition.

CONTROLLED TERM:

\*Appetite: DE, drug effects  
\*Appetite Regulation: DE, drug effects

Child

Eating Disorders: DT, drug therapy

Eating Disorders: ME, metabolism

Human Growth Hormone: PD, pharmacology

Human Growth Hormone: TU, therapeutic use

Humans

\*Peptide Hormones: PD, pharmacology

\*Peptide Hormones: TU, therapeutic use

Treatment Outcome

CAS REGISTRY NO.: 12629-01-5 (Human Growth Hormone)

CHEMICAL NAME: 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 11 OF 66

2005651221 MEDLINE Full-text

ACCESSION NUMBER: PubMed ID: 16332313

TITLE: Cachexia in chronic heart failure: prognostic implications and novel therapeutic approaches.

AUTHOR: Akashi Yoshihiro-J; Springer Jochen; Anker Stefan D

CORPORATE SOURCE: Division of Applied Cachexia Research, Department of

Cardiology, Charite Campus Virchow-Klinikum, Augustenburger

Platz 1, 13353 Berlin, Germany.

Current heart failure reports, (2005 Dec) Vol. 2, No. 4,

pp. 198-203. Ref: 58

Journal code: 101196487. ISSN: 1546-9530.

United States

Journal: Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

English

Priority Journals

200602

Entered STN: 16 Dec 2005

Last Updated on STN: 28 Feb 2006

Entered Medline: 23 Feb 2006

ABSTRACT:

Cachexia in patients with chronic heart failure (CHF) has been recognized for a long time; however, it has not received much attention until recently. Cardiac cachexia, a common and serious complication of CHF, is associated with very poor prognosis. Several studies have demonstrated that increased neurohormonal and immune abnormalities may play a crucial role in the pathophysiology of cardiac cachexia. Hormonal and catabolic/anabolic imbalances of the body are likely to be responsible for the development of cachexia in CHF. Recently, \*\*\*ghrelin\*\*\*, a novel growth hormone-releasing peptide, has been widely noticed to have potential in the treatment of severe CHF and cardiac cachexia. However, further research will be necessary to identify the exact pathways involved and to find the best therapeutic strategies of using ghrelin to fight the wasting process.

CONTROLLED TERM:

\*Cachexia: DT, drug therapy

\*Cachexia: ET, etiology

Cachexia: ME, metabolism

Disease Progression

\*Growth Hormone: ME, metabolism

\*Heart Failure, Congestive: CO, complications

Humans

\*Peptide Hormones: TU, therapeutic use

Prognosis

CAS REGISTRY NO.: 9002-72-6 (Growth Hormone)

CHEMICAL NAME: 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 12 OF 66

2007263516 MEDLINE Full-text

ACCESSION NUMBER: PubMed ID: 17471875

TITLE: [Secondary anorexia: physiology and treatment].

Anorexia secundaria: fisiologia y tratamiento.

AUTHOR: Milke Garcia Maria del Pilar

CORPORATE SOURCE: Coordinadora de Investigacion y Servicio Social en

Nutricion.

SOURCE: Revista de gastroenterologia de Mexico, (2005 Nov) Vol. 70

Suppl 3, pp. 94-5. Ref: 8

Journal code: 0404271. ISSN: 0375-0906.

PUB. COUNTRY:

DOCUMENT TYPE:

Journal: Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

Spanish

Priority Journals

200705

Entered STN: 3 May 2007

Last Updated on STN: 15 May 2007

Entered Medline: 14 May 2007

CONTROLLED TERM:

\*Anorexia: DT, drug therapy

\*Anorexia: ET, etiology

\*Anorexia: PP, physiopathology

\*Anorexia: TH, therapy

Anti-Inflammatory Agents: TU, therapeutic use

Cachexia: CO, complications

Chronic Disease  
\*Gastrointestinal Diseases: CO, complications  
Humans  
Peptide Hormones: TU, therapeutic use  
Steroids: TU, therapeutic use  
0 (Anti-Inflammatory Agents); 0 (Peptide Hormones); 0  
(Steroids); 0 (ghrelin)

CHEMICAL NAME:

L99 ANSWER 13 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2004621114 MEDLINE Full-text  
DOCUMENT NUMBER: PubMed ID: 15569841  
TITLE: Effects of ghrelin administration on left ventricular function, exercise capacity, and muscle wasting in patients with chronic heart failure.  
AUTHOR: Nagaya Noritoshi; Moriya Junji; Yasumura Yoshio; Uematsu Masaaki; Ono Fumiaki; Shimizu Wataru; Ueno Kazuyuki; Kitakaze Masafumi; Miyatake Kunio; Kangawa Kenji  
CORPORATE SOURCE: Department of Internal Medicine, National Cardiovascular Center, 5-7-1 Fujishirodai, Suita, Osaka 565-0856, Japan.. nagayam@hp.ncvc.90.jp  
SOURCE: Circulation. (2004 Dec 14) Vol. 110, No. 24, pp. 3674-9. Electronic Publication: 2004-11-29. Journal code: 0147763. E-ISSN: 1524-4539.  
PUB. COUNTRY: United States  
DOCUMENT TYPE: (CLINICAL TRIAL)  
LANGUAGE: English  
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
ENTRY MONTH: 200505  
ENTRY DATE: Entered STN: 20 Dec 2004  
Last Updated on STN: 26 May 2005  
Entered Medline: 25 May 2005

ABSTRACT: Ghrelin is a novel growth hormone-releasing peptide that also induces vasodilation, inhibits sympathetic nerve activity, and stimulates feeding through growth hormone-independent mechanisms. We investigated the effects of ghrelin on left ventricular (LV) function, exercise capacity, and muscle wasting in patients with chronic heart failure (CHF). METHODS AND RESULTS: Human synthetic ghrelin (2 microg/kg twice a day) was intravenously administered to 10 patients with CHF for 3 weeks. Echocardiography, cardiopulmonary exercise testing, dual x-ray absorptiometry, and blood sampling were performed before and after ghrelin therapy. A single administration of ghrelin elicited a marked increase in serum GH (25-fold). Three-week administration of ghrelin resulted in a significant decrease in plasma norepinephrine (1132+/-188 to 655+/-134 pg/mL; P<0.001). Ghrelin increased LV ejection fraction (27+/-2% to 31+/-2%; P<0.05) in association with an increase in LV mass and a decrease in LV end-systolic volume. Treatment with ghrelin increased peak workload and peak oxygen consumption during exercise. Ghrelin improved muscle wasting, as indicated by increases in muscle strength and lean body mass. These parameters remained unchanged in 8 patients with CHF who did not receive ghrelin therapy. CONCLUSIONS: These preliminary results suggest that repeated administration of ghrelin improves LV function, exercise capacity, and muscle wasting in patients with CHF.

CONTROLLED TERM: Check Tags: Female; Male  
Aged  
Aged, 80 and over  
Body Weight: DE, drug effects  
\*Cachexia: DT, drug therapy

Cachexia: ET, etiology  
Cachexia: PP, physiopathology  
Chronic Disease  
Eating: DE, drug effects  
\*Exercise  
Heart Failure, Congestive: CO, complications  
\*Heart Failure, Congestive: DT, drug therapy  
Heart Failure, Congestive: PP, physiopathology  
Hemodynamic Processes  
Human Growth Hormone: BL, blood  
Humans  
Infusions, Intravenous  
Middle Aged  
Oxygen Consumption: DE, drug effects  
Peptide Hormones: AD, administration & dosage  
Peptide Hormones: AE, adverse effects  
\*Peptide Hormones: TU, therapeutic use  
Pulmonary Ventilation: DE, drug effects  
Sympathetic Nervous System: DE, drug effects  
Sympathetic Nervous System: PP, physiopathology  
Ventricular Function, Left: DE, drug effects  
12629-01-5 (Human Growth Hormone)  
CHEMICAL NAME: 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 14 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2004599327 MEDLINE Full-text  
DOCUMENT NUMBER: PubMed ID: 15572207  
TITLE: Regulation of ghrelin gene expression in stomach and feeding response to a ghrelin analogue in two strains of rats.  
AUTHOR: Liu Xiaotuan; York David A; Bray George A  
CORPORATE SOURCE: Experimental Obesity Laboratory, Pennington Biomedical Research Center, 6400 Perkins Road, Baton Rouge, LA 70808, USA.. liux@brc.edu  
SOURCE: Peptides. (2004 Dec) Vol. 25, No. 12, pp. 2171-7. Journal code: 8008690. ISSN: 0196-9781.  
PUB. COUNTRY: United States  
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200506  
ENTRY DATE: Entered STN: 2 Dec 2004  
Last Updated on STN: 8 Jun 2005  
Entered Medline: 7 Jun 2005

ABSTRACT: Ghrelin is a peptide produced by the stomach and released into the circulation. As a natural ligand of the growth hormone secretagogue (GHS) receptor, it stimulates growth hormone secretion but it also stimulates feeding in humans and rodents. The orexigenic effect of ghrelin has been related to AgRP/NPY and orexin pathways. We proposed that ghrelin might be involved in the susceptibility to diet induced obesity and in the regulation of macronutrient selection. We have investigated these hypotheses in two strains of rat, the Osborne-Mendel (OM) rat that prefers diets high in fat and is sensitive to dietary obesity and the S5B/Pl (S5B) rat that prefers a low fat diet and is resistant to high fat diet induced obesity. OM and S5B rats were adapted to a choice of high fat (HF) and low fat (LF) diet for 2 weeks. GHRP-2, an \*\*\*analogue\*\*\* of ghrelin, was injected intraperitoneally into satiated and 24 h fasted rats at doses of 10, 30 and 90 nmol. Food intake was measured over the next 4 h period. In satiated S5B rats, GHRP-2 stimulated

intake of the LF diet in a dose dependent manner but did not affect the intake of the HF diet. In satiated OM rats, 90 nmol of GHRP-2 stimulated HF intake. In contrast, neither fasted OM nor S5B rats increased the intake of either HF or LF diet in response to GHRP-2. Fasting for 18 h induced a large rise in ghrelin mRNA in stomach of OM rats but not in S5B rats. There were no significant differences in plasma total ghrelin. An increase in ghrelin mRNA in stomach immediately before the onset of the dark cycle was observed in OM but not in S5B rats. Active ghrelin level was significantly affected by different feeding conditions in both OM and S5B rats adapted on HF diet with a trend to increase after 48 h of fasting and to decline to basal levels following 10 h of refeeding. These data suggest that ghrelin stimulates the intake of the preferred macronutrient. In addition, a differential regulation of ghrelin gene expression between OM and S5B rats may be important in their differential sensitivity to HF diet-induced obesity.

CONTROLLED TERM:

Check Tags: Male

Animals

Dietary Fats: AD, administration & dosage

\*Eating

Eating: DE, drug effects

Energy Intake: DE, drug effects

Fasting: ME, metabolism

\*Gene Expression-Regulation

\*Oligopeptides: PD, pharmacology

Peptide Hormones: BI, biosynthesis

Peptide Hormones: BL, blood

\*Peptide Hormones: GE, genetics

Rats

\*Stomach: ME, metabolism

CHEMICAL NAME: 0 (Dietary Fats); 0 (Oligopeptides); 0 (Peptide Hormones); 0 (ghrelin); 0 (growth hormone-releasing peptide-2)

L99 ANSWER 15 OF 66

ACCESSION NUMBER: 2004114490 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 15004432

TITLE: Orexigenic actions of ghrelin in goldfish: feeding-induced changes in brain and gut mRNA expression and serum levels, and responses to central and peripheral injections.

AUTHOR: Unniappan Suraj; Canosa Luis Fabian; Peter Richard E

CORPORATE SOURCE: Department of Biological Sciences, University of Alberta, Edmonton, Alta., Canada.

SOURCE: Neuroendocrinology. (2004 Feb) Vol. 79, No. 2, pp. 100-8. Journal code: 0035665. ISSN: 0028-3835.

PUB. COUNTRY: Switzerland

DOCUMENT TYPE: (COMPARATIVE STUDY)

JOURNAL: Article: (JOURNAL ARTICLE)

(RESEARCH SUPPORT, NON-U.S. GOV'T)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200405

ENTRY DATE: Entered STN: 9 Mar 2004

Last Updated on STN: 18 May 2004

Entered Medline: 17 May 2004

ABSTRACT:

In this study, we examined (i) the preprandial, postprandial and starvation-induced changes in the preproghrelin mRNA expression and serum ghrelin levels, and (ii) the effects of intracerebroventricular and intraperitoneal administration of ghrelin on food intake in goldfish. Slot blot analysis revealed a significant postprandial decrease in preproghrelin mRNA expression in the hypothalamus (1 and 3 h after feeding) and gut (3 h after feeding). A similar postprandial decrease (1 and 3 h after feeding) in

serum ghrelin levels was also detected. In the fish that were unfed at the regular feeding time, the hypothalamic preproghrelin mRNA expression and the serum ghrelin levels remained unchanged, while the preproghrelin mRNA expression in the gut decreased 3 h after the regular feeding time. Starvation increased preproghrelin mRNA expression in the hypothalamus and gut on the 7th day. Serum ghrelin levels were significantly elevated on days 3 and 5 of starvation. Intracerebroventricular injections of n-octanoylated \*\*\*ghrelin\*\*\* -like peptides (GRL(11-12)) (10 ng/g body weight) and human ghrelin (1 and 10 ng/g body weight) and intraperitoneal injections of n-octanoylated GRL(11-12)) (10 ng/g body weight), GRL(11-19)) (100 ng/g body weight) and human ghrelin (10 and 100 ng/g body weight) stimulated food intake in goldfish. The patterns of synthesis, secretion and actions indicate that ghrelin is an orexigen in goldfish.

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CONTROLLED TERM:

Check Tags: Female; Male

Animals

\*Appetite: PH, physiology

\*Digestive System: ME, metabolism

Eating: PH, physiology

\*Feeding Behavior: PH, physiology

\*Goldfish: PH, physiology

Growth Hormone: PH, physiology

\*Hypothalamus: ME, metabolism

Peptide Hormones: GE, genetics

Peptide Hormones: ME, metabolism

\*Peptide Hormones: PH, physiology

Postprandial Period

Protein Precursors: GE, genetics

Protein Precursors: ME, metabolism

RNA, Messenger: AN, analysis

Starvation: GE, genetics

Starvation: ME, metabolism

9002-72-6 (Growth Hormone)

0 (Peptide Hormones); 0 (Protein Precursors); 0 (RNA,

Messenger); 0 (ghrelin)

L99 ANSWER 16 OF 66

ACCESSION NUMBER: 2004434142 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 15339248

TITLE: Novel analogs of ghrelin: physiological

and clinical implications.

AUTHOR: Halem Heather A; Taylor John E; Dong Jesse Z; Shen Yeelana;

Datta Rakesh; Abizaid Alfonso; Diano Sabrina; Horvath

Tamas; Zizzari Philippe; Bluet-Pajot Marie-Therese;

Egelbaum Jacques; Culler Michael D

CORPORATE SOURCE: IPSEN, 27 Maple Street, Milford, Massachusetts 01757, USA.

SOURCE: European Journal of endocrinology / European Federation of

Endocrine Societies, (2004 Aug) Vol. 151 Suppl 1, pp.

S71-5.

Journal code: 9423848. ISSN: 0804-4643.

PUB. COUNTRY: England; United Kingdom

DOCUMENT TYPE: Journal; Article: (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200410

ENTRY DATE: Entered STN: 2 Sep 2004

Last Updated on STN: 17 Oct 2004

Entered Medline: 15 Oct 2004

ABSTRACT:

Ghrelin, the 28 amino acid peptide recently identified as the natural ligand

for the growth hormone (GH) secretagogue (GHS) receptor, has multiple activities in addition to stimulation of GH secretion, including stimulation of feeding and weight gain. To utilize these actions for potential therapeutic benefit, we have produced analogs of human ghrelin with enhanced metabolic stability, affinity for the GHS receptor, and efficacy in stimulating weight gain. We have also discovered an analog of ghrelin, BIM-28163, that is an antagonist at the GHS receptor and that fully inhibits GHS receptor activation induced by native ghrelin. In vivo, BIM-28163 does not increase GH secretion but fully blocks ghrelin-induced GH secretion. In contrast, BIM-28163 acts as a full agonist with regard to the ghrelin actions of stimulating weight gain and food intake. These results suggest that a receptor other than the GHS receptor mediates the actions of ghrelin on feeding and weight gain. This concept is strengthened by our observation that at certain hypothalamic sites, BIM-28163 acts as an antagonist of ghrelin-induced neuronal activation, while at other sites, both ghrelin and BIM-28163 induce neuronal activation via the same receptor. Collectively, these results indicate the existence of a novel ghrelin receptor that may regulate the feeding activity of ghrelin. Using BIM-28163 as a tool to define the endogenous role of ghrelin in normal GH secretion, we have demonstrated that antagonism of the GHS receptor in normal rats does not impair the pulsatility of GH secretion but lowers the pulse amplitude and mean GH level. These results demonstrate that endogenous ghrelin acts to amplify the basic pattern of GH secretion established by the interplay of hypothalamic GH-releasing hormone and somatostatin. These studies demonstrate the feasibility of creating ghrelin analogs that are selective for specific activities, as well as their utility in dissecting the role of ghrelin in both normal physiology and specific pathologies.

CONTROLLED TERM: Check Tags: Male

Animals  
Eating: DE, drug effects  
Growth Hormone: SE, secretion

Humans  
\*Peptide Hormones: AI, antagonists & inhibitors  
\*Peptide Hormones: PD, pharmacology  
\*Peptide Hormones: PH, physiology  
\*Peptide Hormones: TU, therapeutic use

Rats

\*Receptors, G-Protein-Coupled: AI, antagonists & inhibitors  
Weight Gain: DE, drug effects  
0 (BIM28163); 0 (Growth Hormone)  
0 (BIM28163); 0 (Peptide Hormones); 0 (Receptors, G-Protein-Coupled); 0 (ghrelin); 0 (growth hormone secretagogue receptor)

L99 ANSWER 17 OF 66 MEDLINE on STN  
ACCESSION NUMBER: 2003566796 MEDLINE Full-text

DOCUMENT NUMBER: 12960078

TITLE: Alterations of plasma ghrelin levels in rats with lipopolysaccharide-induced wasting syndrome and effects of ghrelin treatment on the syndrome.

AUTHOR: Hatakeya Yuji; Akamizu Takashi; Hosoda Hiroshi; Kanamoto Naotetsu; Moriama Kenji; Kangawa Kenji; Takaya Kazuhiko; Nakao Kazuo

CORPORATE SOURCE: Department of Medicine and Clinical Science, Kyoto University Graduate School of Medicine, Kyoto 606-8507, Japan.

SOURCE: Endocrinology, (2003 Dec) Vol. 144, No. 12, pp. 5365-71. Electronic Publication: 2003-08-28.

JOURNAL CODE: 0375040. ISSN: 0013-7227.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal: Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 200401

ENTRY DATE: Entered STN: 16 Dec 2003

Last Updated on STN: 6 Jan 2004

Entered Medline: 5 Jan 2004

#### ABSTRACT:

Ghrelin not only strongly stimulates GH secretion, but is also involved in energy homeostasis by stimulating food intake and promoting adiposity through a GH-independent mechanism. These effects of ghrelin may play an important role in the pathophysiology of inflammatory wasting syndrome, in which both the somatotropic axis and energy balance are altered. In this study we investigated plasma ghrelin concentrations after lipopolysaccharide (LPS) administration to rats, a model of the wasting syndrome and critical illness. In addition, the therapeutic potential of the antiwasting effects of ghrelin was explored using LPS-injected rats. A single LPS injection suppressed plasma ghrelin levels 6 and 12 h later. Maximal reduction was observed 12 h after LPS injection, in a dose-dependent manner. In contrast, plasma ghrelin levels were elevated after repeated LPS injections on d 2 and 5. Peripheral administration of ghrelin twice daily (10 nmol/rat) for 5 d increased body weight gain in repeated LPS-injected rats. Furthermore, both adipose tissue weight and plasma leptin concentrations were increased after ghrelin administration in these rats. In conclusion, plasma ghrelin levels are altered in LPS-injected rats, and ghrelin treatment may provide a new therapeutic approach to the wasting syndrome and critical illness.

CONTROLLED TERM: Check Tags: Male

Adipose Tissue: AH, anatomy & histology

Adipose Tissue: DE, drug effects

Animals

Eating: DE, drug effects

Leptin: BL, blood

Lipopolysaccharides

Organ Size: DE, drug effects

\*Peptide Hormones: BL, blood

\*Peptide Hormones: PD, pharmacology

Radioimmunoassay

Rats

Rats, Wistar

Spleen: AH, anatomy & histology

Spleen: DE, drug effects

\*Wasting Syndrome: BL, blood

\*Wasting Syndrome: CI, chemically induced

\*Wasting Syndrome: DT, drug therapy

CHEMICAL NAME: 0 (Leptin); 0 (lipopolysaccharides); 0 (Peptide Hormones); 0 (ghrelin)

L99 ANSWER 18 OF 66

ACCESSION NUMBER: 2003411230 MEDLINE Full-text

DOCUMENT NUMBER: PubMed ID: 12951072

TITLE: Ghrelin promotes pancreatic adenocarcinoma cellular proliferation and invasiveness.

AUTHOR: Duxbury Mark S; Waseem Talat; Ito Hiromichi; Robinson

Malcolm K; Zinner Michael J; Ashley Stanley W; Whang Edward

CORPORATE SOURCE: Department of Surgery, Brigham and Women's Hospital,

Harvard Medical School, Boston, MA 02115, USA.

CONTRACT NUMBER: DK 02786 (NIDDK)

DK 47326 (NIDDK)

**SOURCE:** Biochemical and biophysical research communications, (2003 Sep 19) Vol. 309, No. 2, pp. 464-8.  
**JOURNAL CODE:** 0372516. ISSN: 0006-291X.  
**PUB. COUNTRY:** United States  
**DOCUMENT TYPE:** (COMPARATIVE STUDY)  
**JOURNAL:** Article; (JOURNAL ARTICLE)  
**(RESEARCH SUPPORT, NON-U.S. GOV'T)**  
**(RESEARCH SUPPORT, U.S. GOV'T, P.H.S.)**  
**LANGUAGE:** English  
**PRIORITY JOURNALS**  
**FILE SEGMENT:** 200310  
**ENTRY MONTH:** Entered STN: 3 Sep 2003  
**ENTRY DATE:** Last Updated on STN: 1 Nov 2003  
 Entered Medline: 31 Oct 2003

**ABSTRACT:**

Ghrelin, a newly described potent orexigenic peptide, may have therapeutic potential in patients with cachexia. We assessed whether pancreatic adenocarcinoma, commonly associated with marked cachexia, is a \*\*\*ghrelin\*\*\*-responsive malignancy. Pancreatic adenocarcinoma cells were exposed to ghrelin (0-100 nM). Proliferation was determined by MTT assay. Ghrelin, ghrelin 1a and 1b receptor expression and Akt phosphorylation were assessed. The effects of ghrelin (+/- its antagonist D-Lys-GHRP6, or the PI3-K inhibitor Wortmannin) on cellular motility and invasiveness were quantified by Matrigel Boyden chamber assay. All cell lines expressed ghrelin 1a and 1b receptor transcript and protein, but only PANC1 weakly expressed ghrelin transcript. Ten nanomolar \*\*\*ghrelin\*\*\* increased proliferation, motility, invasiveness, and Akt phosphorylation in all cell lines. Proliferation was affected dose-dependently, being suppressed at higher ghrelin concentrations. D-Lys-GHRP6 suppressed ghrelin-induced proliferation, invasion, and Akt phosphorylation. Wortmannin abolished the effects of ghrelin on motility and invasiveness. Pancreatic adenocarcinoma is a ghrelin-responsive malignancy.

**CONTROLLED TERM:**

Adenocarcinoma: CO, complications  
 \*Adenocarcinoma: PA, pathology  
 Androstadienes: PD, pharmacology  
 Cachexia: DT, drug therapy  
 Cachexia: ET, etiology  
 Cell Division: DE, drug effects  
 Dose-Response Relationship, Drug  
 Neoplasm Invasiveness.  
 Pancreatic Neoplasms: CO, complications  
 \*Pancreatic Neoplasms: PA, pathology  
 \*Peptide Hormones: PD, pharmacology  
 Peptide Hormones: TU, therapeutic use  
 Tumor Cells, Cultured: DE, drug effects  
 Tumor Cells, Cultured: ME, metabolism  
 Tumor Cells, Cultured: PA, pathology  
 19545-26-7 (wortmannin)  
 0 (Androstadienes); 0 (Peptide Hormones); 0 (ghrelin)

**CAS REGISTRY NO.:** 19545-26-7 (wortmannin)  
**CHEMICAL NAME:** 0 (Androstadienes); 0 (Peptide Hormones); 0 (ghrelin)  
**L99 ANSWER 19 OF 66** MEDLINE on STN  
**ACCESSION NUMBER:** 2003055497 MEDLINE Full-text  
**DOCUMENT NUMBER:** PubMed ID: 12565855  
**TITLE:** Anti-cachectic effect of ghrelin in nude mice bearing human melanoma cells.  
**AUTHOR:** Hanada Takeshi; Toshiaki Koji; Kajimura Naoko; Nara-Ashizawa Noriko; Tsukada Toshihiko; Hayashi Yujiro; Osuye Kazuhiro; Kangawa Kenji; Matsukura Shigeru; Nakazato

**CORPORATE SOURCE:** Masamitsu  
 Third Department of Internal Medicine, Miyazaki Medical College, Miyazaki 889-1692, Japan.  
**SOURCE:** Biochemical and biophysical research communications, (2003 Feb 7) Vol. 301, No. 2, pp. 275-9.  
**JOURNAL CODE:** 0372516. ISSN: 0006-291X.  
**PUB. COUNTRY:** United States  
**DOCUMENT TYPE:** Journal; Article; (JOURNAL ARTICLE)  
**(RESEARCH SUPPORT, NON-U.S. GOV'T)**  
**LANGUAGE:** English  
**PRIORITY JOURNALS**  
**FILE SEGMENT:** 200304  
**ENTRY MONTH:** Entered STN: 5 Feb 2003  
**ENTRY DATE:** Last Updated on STN: 17 Apr 2003  
 Entered Medline: 15 Apr 2003

**ABSTRACT:**

Ghrelin is a novel brain-gut peptide that stimulates food intake and body weight gain. We studied the anabolic effect of ghrelin in a cancer cachexia mouse model. SEKI, a human melanoma cell line, was inoculated into nude mice to examine the effects of ghrelin on food intake and body weight. The intraperitoneal administration of ghrelin twice a day (6 nmol/mice/day) for 6 days suppressed weight loss in SEKI-inoculated mice and increased the rate of weight gain in vehicle-treated nude mice. \*\*\*Ghrelin\*\*\* administration also increased food intake in both SEKI- and vehicle-treated mice. Both the weight of white adipose tissue and the plasma leptin concentration were reduced in tumor-inoculated mice compared with vehicle-treated mice; these factors increased following ghrelin administration. The levels of both ghrelin peptide and mRNA in the stomach were upregulated in tumor-inoculated mice. The anabolic effect of \*\*\*ghrelin\*\*\* efficiently reverses the cachexia in mice bearing SEKI human melanoma. Ghrelin therefore may have a therapeutic ability to ameliorate cancer cachexia.

**CONTROLLED TERM:**

Check Tags: Female  
 Animals  
 Body Weight  
 \*Cachexia  
 Cell Transplantation  
 Growth Inhibitors: BL, blood  
 Humans  
 Injections, Intraperitoneal  
 \*Interleukin-6  
 Leptin: BL, blood  
 Leukemia Inhibitory Factor  
 Lymphokines: BL, blood  
 \*Melanoma: ME, metabolism  
 Mice  
 Mice, Inbred BALB C  
 Mice, Nude  
 Neoplasms: PP, physiopathology  
 Peptide Hormones: AD, administration & dosage  
 \*Peptide Hormones: ME, metabolism  
 Stomach: ME, metabolism  
 Tumor Cells, Cultured  
 human); 0 (Growth Inhibitors); 0 (Interleukin-6); 0 (LIF protein, human); 0 (Leptin); 0 (Leukemia Inhibitory Factor); 0 (Lif protein, mouse); 0 (Lymphokines); 0 (Peptide Hormones); 0 (ghrelin)

**CHEMICAL NAME:**

0 (Growth Inhibitors); 0 (Interleukin-6); 0 (LIF protein, human); 0 (Leptin); 0 (Leukemia Inhibitory Factor); 0 (Lif protein, mouse); 0 (Lymphokines); 0 (Peptide Hormones); 0 (ghrelin)

**L99 ANSWER 20 OF 66** MEDLINE on STN  
**ACCESSION NUMBER:** 2002619389 MEDLINE Full-text



DOCUMENT NUMBER: PubMed ID: 12376579  
 TITLE: Hypophysectomy prevents ghrelin-induced adiposity and increases gastric ghrelin secretion in rats.  
 AUTHOR: Teschop Matthias; Elora David B; Mayer John P; Heiman Mark L  
 CORPORATE SOURCE: German Institute of Human Nutrition, Bergh-Rehrbrücke, Germany.. tschoep@mail.dife.de  
 SOURCE: Obesity research, (2002 Oct) Vol. 10, No. 10, pp. 991-9. Journal code: 9305691. ISSN: 1071-7323.  
 PUB. COUNTRY: United States  
 DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 200301  
 ENTRY DATE: Entered STN: 12 Oct 2002  
 Last Updated on STN: 22 Jan 2003  
 Entered Medline: 21 Jan 2003

ABSTRACT: The novel gastric hormone ghrelin has recently been identified as an important modulator of energy homeostasis. Leptin-responsive hypothalamic neuropeptide Y/Agouti-related protein neurons are believed to mediate afferent ghrelin signals. Little is known, however, about ghrelin-induced efferent signals. We therefore investigated if hypothalamic-pituitary axes have a role in transferring ghrelin-induced changes of energy balance to the periphery. RESEARCH METHODS AND PROCEDURES: We subcutaneously injected hypophysectomized, as well as adrenalectomized, thyroidectomized, and sham-operated control rats with GH secretagogues (ghrelin, growth hormone (GH)-releasing peptide) for 1 week. Body weight, food intake, and body composition (chemical carcass analysis) were analyzed and compared with vehicle-treated controls. In addition, we quantified circulating levels of endogenous ghrelin in hypophysectomized and GH-treated normal rats. RESULTS: GH-secretagogue treatment of sham-operated control rats dose-proportionally increased food intake, body weight, and fat mass compared with vehicle-injected controls ( $p < 0.01$ ). These effects, however, were not observed in ghrelin-treated hypophysectomized, thyroidectomized, or adrenalectomized rats, indicating an essential role for the pituitary axis in ghrelin-induced adiposity. Circulating levels of endogenous ghrelin were reduced by administration of GH in normal rats and were about 3-fold higher in hypophysectomized rats ( $n = 20$ ,  $p = 0.001$ ), suggesting a regulatory feedback loop involving the stomach and the pituitary to regulate gastric ghrelin secretion. DISCUSSION: According to these results, the endocrine pituitary is mediating ghrelin-induced changes toward a positive energy balance and is involved in the regulation of ghrelin secretion through a gastro-hypophyseal feedback loop.

CONTROLLED TERM:  
 Check Tags: Male  
 Adipose Tissue: ME, metabolism  
 Adipose Tissue: PH, physiology  
 Adrenalectomy  
 Animals  
 Body Weight: DE, drug effects  
 Body Weight: PH, physiology  
 Eating: DE, drug effects  
 Eating: PH, physiology  
 Growth Hormone: ME, metabolism  
 Growth Hormone: PD, pharmacology  
 Hypophysectomy  
 Hypothalamo-Hypophyseal System: DE, drug effects  
 Hypothalamo-Hypophyseal System: ME, metabolism  
 Hypothalamo-Hypophyseal System: PH, physiology  
 Insulin-Like Growth Factor I: PD, pharmacology  
 Oligopeptides: PD, pharmacology

Peptide Hormones: BL, blood  
 Peptide Hormones: ME, metabolism  
 Peptide Hormones: PD, pharmacology  
 Peptide Hormones: SE, secretion  
 Pituitary-Adrenal System: DE, drug effects  
 Pituitary-Adrenal System: ME, metabolism  
 Pituitary-Adrenal System: PH, physiology  
 Rats  
 Rats, Sprague-Dawley  
 Thyroidectomy  
 CAS REGISTRY NO.: 67763-96-6 (Insulin-Like Growth Factor I); 87616-84-0 (growth hormone releasing hexapeptide); 9002-72-6 (Growth Hormone)  
 CHEMICAL NAME: 0 (Oligopeptides); 0 (Peptide Hormones); 0 (ghrelin); 0 (growth hormone-releasing peptide-2)

L99 ANSWER 21 OF 66 MEDLINE on STN  
 ACCESSION NUMBER: 2001643003 MEDLINE Full-text  
 DOCUMENT NUMBER: PubMed ID: 11679419  
 TITLE: Chronic central infusion of ghrelin increases hypothalamic neuropeptide Y and Agouti-related protein mRNA levels and body weight in rats.  
 AUTHOR: Kamagai J; Tamura H; Shimizu T; Ishii S; Sugihara H; Wakabayashi I  
 CORPORATE SOURCE: Department of Medicine, Nippon Medical School, Tokyo, Japan.. jkamagai@nms.ac.jp  
 SOURCE: Diabetes, (2001 Nov) Vol. 50, No. 11, pp. 2438-43. Journal code: 0372763. ISSN: 0012-1797.  
 PUB. COUNTRY: United States  
 DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: English  
 FILE SEGMENT: RESEARCH SUPPORT, NON-U.S. GOV'T  
 ENTRY MONTH: 200112  
 ENTRY DATE: Entered STN: 7 Nov 2001  
 Last Updated on STN: 23 Jan 2002  
 Entered Medline: 7 Dec 2001

ABSTRACT: Ghrelin, an endogenous ligand for the growth hormone secretagogue receptor (GHS-R), was originally purified from the rat stomach. Like the synthetic growth hormone secretagogues (GHSs), ghrelin specifically releases growth hormone (GH) after intravenous administration. Also consistent with the central actions of GHSs, ghrelin-immunoreactive cells were shown to be located in the hypothalamic arcuate nucleus as well as the stomach. Recently, we showed that a single central administration of ghrelin increased food intake and hypothalamic agouti-related protein (AGRP) gene expression in rodents, and the orexigenic effect of this peptide seems to be independent of its GH-releasing activity. However, the effect of chronic infusion of ghrelin on food consumption and body weight and their possible mechanisms have not been elucidated. In this study, we determined the effects of chronic intracerebroventricular treatment with ghrelin on metabolic factors and on neuropeptide genes that are expressed in hypothalamic neurons that have been previously shown to express the GHS-R and to regulate food consumption. Chronic central administration of rat ghrelin (1 microg/rat every 12 h for 72 h) significantly increased food intake and body weight. However, it did not affect plasma insulin, glucose, leptin, or GH concentrations. We also found that chronic central administration of ghrelin increased both neuropeptide Y (NPY) mRNA levels (151.0 +/- 10.1% of saline-treated controls;  $p < 0.05$ ) and AGRP mRNA levels (160.0 +/- 22.5% of saline-treated controls;  $p < 0.05$ ) in the arcuate nucleus. Thus, the primary hypothalamic targets of ghrelin are

NPY/AGRP-containing neurons, and ghrelin is a newly discovered orexigenic peptide in the brain and stomach.  
 Check Tags: Male  
 CONTROLLED TERM:

Animals  
 \*Body Weight: DE, drug effects  
 Drug Administration Schedule  
 Eating: DE, drug effects  
 Gene Expression: DE, drug effects  
 Hypothalamus: DE, drug effects  
 \*Hypothalamus: ME, metabolism  
 Injections, intraventricular  
 Interleukin Signaling Peptides and Proteins  
 \*Neuropeptide Y: ME, metabolism  
 \*Peptide Hormones  
 \*Peptides: AD, administration & dosage  
 \*Peptides: PD, pharmacology  
 \*Proteins: GE, genetics  
 \*RNA, Messenger: ME, metabolism  
 Rats  
 Rats, Sprague-Dawley

CHEMICAL NAME:  
 0 (Interleukin Signaling Peptides and Proteins); 0  
 (Neuropeptide Y); 0 (Peptide Hormones); 0 (Peptides); 0  
 (Proteins); 0 (RNA, Messenger); 0 (agouti-related protein);  
 0 (ghrelin)

L99 ANSWER 22 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 3

ACCESSION NUMBER: 2006:1357979 CAPLUS Full-text

DOCUMENT NUMBER: 146:99557

TITLE: Compositions and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation.

INVENTOR(S): Meguid, Michael M.; Suzuki, Susumu  
 PATENT ASSIGNEE(S): The Research Foundation of State University of New York, USA

SOURCE: U.S. Pat. Appl. Publ., 17pp.

CODEN: USXXCO

PATENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2006293233	A1	20061228	US 2006-347195	20060203
PRIORITY APPLN. INFO.:				
AB The present invention relates to comps. and methods for regulating body weight, and for treating conditions associated with obesity, particularly obesity-related diabetes. The present invention is premised on the discovery that body weight can be effectively regulated by modulating the levels and/or activities of two gut hormones, PYY and ghrelin.				
INCL 514012000				
CC 17-6 (Food and Feed Chemistry)				
IT Section cross-reference(s): 18, 63				
AB Antidiabetic agents				
Appetite stimulants				
Food additives				

(comps. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)

IT Appetite

(control of; comps. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)  
 IT 106388-42-5, PYY 106388-42-5D, PYY, analogs 118997-30-1D, Human Peptide YY, amino acid sequence 3-36 246146-55-4, BIIE 0246 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, analogs  
 RL: FFD (Food or feed use); THU (Therapeutic use); BIOI (Biological study); USES (Uses)  
 (comps. and methods for modulating body weight and treating obesity-related disorders by gut hormone regulation)

L99 ANSWER 23 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 6

ACCESSION NUMBER: 2004:252369 CAPLUS Full-text

DOCUMENT NUMBER: 140:269531

TITLE:

Autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss in human and animal

INVENTOR(S): Boving, Tine Elisabeth Gottschalk; Klynsner, Steen  
 PATENT ASSIGNEE(S): Pharmexa A/S, Den.  
 SOURCE: PCT Int. Appl., 83 pp.  
 CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004024183	A1	20040325	WO 2003-DK592	20030912
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, MZ, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, ST, TJ, TM, TN, TR, TT, TZ, UA, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: GH, GM, KE, LS, MM, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GW, GN, GQ, MW, ML, MR, NE, NW, SD, TG				
CA 2498739	A1	20040325	CA 2003-2498739	20030912
AU 2003263150	A1	20040430	AU 2003-263150	20030912
EP 1539232	A1	20050615	EP 2003-794825	20030912
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK, CN 1694724 A 20051109 CN 2003-825086				
JP 2006504413 T 20060209 JP 2004-535024 20030912				
MX 2005PA02699 A 20050920 MX 2005-PA2699 20050310				
IN 2005KN00485 A 20060623 IN 2005-KN485 20050323				
NO 2005001779 A 20050411 NO 2005-1779 20050411				
ZA 2005002929 A 20060222 ZA 2005-2929 20050411				
PRIORITY APPLN. INFO.:				
DK 2002-1345 A 20020912				
US 2002-410164P P 20020912				
WO 2003-DK592 W 20030912				

AB Disclosed are novel methods that generally rely on immunization against autologous ghrelin. Immunization is preferably effected by administration of analogs of autologous ghrelin, said analogs being capable of inducing antibody production against the autologous ghrelin polypeptides. Especially preferred

as an immunogen is autologous ghrelin, which has been modified by introduction of one single or a few foreign, immunodominant and promiscuous T-cell epitopes. Also disclosed are nucleic acid vaccination against ghrelin and vaccination using live vaccines as well as methods and means useful for the vaccination. Such methods and means include methods for the preparation of analogs and pharmaceutical formulations, as well as nucleic acid fragments, vectors, transformed cells, polypeptides and pharmaceutical formulations.

IC ICM A61K039-39  
ICS A61K039-385; A61K039-00; C07K014-435; A61P003-04

CC 15-2 (Immunochemistry)  
Section cross-reference(s): 3, 63

IT Amide group  
Animal cell  
Animal cell line  
Animals  
Anorexia  
Antigen presentation  
Antigen-presenting cell  
Bos taurus  
Burn

Cachexia  
Canis familiaris  
DNA sequences  
Epitopes  
Eubacteria  
Eukaryota  
Fungi  
Genetic vectors  
Human  
Immunostimulants  
Immunotherapy  
Influenza virus  
Microorganism  
Molecular cloning  
Mus

Obesity  
PCR (polymerase chain reaction)  
Plant cell  
Plasmodium falciparum  
Prokaryota  
Protein sequences  
Protozoa  
Rattus  
Sterculia urens  
Sus scrofa domestica  
Viral vectors  
Wound  
Yeast

cDNA sequences  
(autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)

IT Body weight  
(excess gain; autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)

IT Body weight  
(loss; autologous ghrelin and encoding nucleic acid and foreign T cell epitope conjugates for vaccination against obesity and excess body fat increase or loss)

IT 126779-13-3P 126779-14-4P 161147-59-7P 304853-26-7DP,  
ghrelin, epitopic and chimeric derivs. 674383-81-4P 674383-82-5P  
674383-83-6P 674383-84-7P 674383-85-8P  
RL: BPN (Biosynthetic Preparation); BSU (Biological study, unclassified);  
PRP (Properties); THU (Therapeutic use); BIOL (Biological study); PREP  
(Preparation); USES (Uses)  
(autologous ghrelin and encoding nucleic acid and foreign T cell  
epitope conjugates for vaccination against obesity and excess body fat  
increase or loss)

REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS  
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 24 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 7  
ACCESSION NUMBER: 2004:80708 CAPLUS Full-text  
DOCUMENT NUMBER: 140:140069

TITLE: Synthesis and therapeutic uses of ghrelin analogs  
INVENTOR(S): Dong, Zheng Xin; Shen, Yeelana  
PATENT ASSIGNEE(S): Scientifiques (S.C.R.A.S.) Societe De Conseils De  
Recherches Et D'Application, Fr.  
SOURCE: PCT Int. Appl., 99 pp.  
CODEN: PIXXD2

DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004009616	A2	20040129	WO 2003-US22925	20030723
WO 2004009616	A3	20060209		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KZ, LC, LG, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MX, MY, NZ, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, NG, SN, TD, TG				
CA 2491946	A1	20040129	CA 2003-2491946	20030723
AU 2003254119	A1	20040209	AU 2003-254119	20030723
EP 1578778	A2	20050928	EP 2003-765930	20030723
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK				
JP 2006515271	T	20060525	JP 2004-523304	20030723
CN 1832753	A	20060913	CN 2003-817446	20030723
BR 2003012871	A	20070710	BR 2003-12871	20030723
MX 2005000083	A	20050323	MX 2005-83	20050106
MX 2005PA00908	A	20050722	MX 2005-PA908	20050121
US 2005272648	A1	20051208	US 2005-522398	20050121
IN 2005KN00153	A	20060609	IN 2005-KN153	20050208
PRIORITY APPL. INFO.:				
			US 2002-397834P	P 20020723
			US 2002-427488P	P 20021119
			WO 2003-US22925	W 20030723

AB The invention comprises the synthesis of peptidyl ghrelin analogs that possess agonist or antagonist activity toward growth hormone secretagogue receptor, along with therapeutic and non-therapeutic uses thereof.

IC ICM C07K  
CC 2-10 (Mammalian Hormones)

## Section cross-reference(s): 34

IT	AIDS (disease)		
IT	Anorexia		
IT	Bulimia		
IT	Cachexia		
IT	Chemotherapy		
IT	Dialysis		
IT	Immobilization, animal		
IT	Radiotherapy		
IT	(-associated weight loss; synthesis and therapeutic uses of ghrelin analogs)		
IT	Cachexia		
IT	(cancerous, -associated weight loss; synthesis and therapeutic uses of ghrelin analogs)		
IT	Calculi, biliary		
IT	Hypertension		
IT	Neoplasm		
IT	Osteoarthritis		
IT	(excessive weight contributing to; synthesis and therapeutic uses of ghrelin analogs)		
IT	Body weight		
IT	(gain and maintenance; synthesis and therapeutic uses of ghrelin analogs)		
IT	Body weight		
IT	(loss, accessory to another disorder; synthesis and therapeutic uses of ghrelin analogs)		
IT	Antiarrhythmics		
IT	Antidiabetic agents		
IT	Antihypertensives		
IT	Antibesity agents		
IT	Appetite		
IT	Appetite depressants		
IT	Appetite stimulants		
IT	Cardiovascular agents		
IT	Cardiovascular system, disease		
IT	Diabetes mellitus		
IT	Drug delivery systems		
IT	Human		
IT	Obesity		
IT	Sexual disorders		
IT	Wound		
IT	Wound healing		
IT	Wound healing promoters		
IT	(synthesis and therapeutic uses of ghrelin analogs)		
IT	Disease, animal		
IT	(wasting, -associated weight loss; synthesis and therapeutic uses of ghrelin analogs)		
IT	304853-26-70P, Ghrelin, analogs	651048-33-8P	651048-34-9P
IT	651048-35-0P	651048-37-2P	651048-38-3P
IT	651048-40-7P	651048-41-8P	651048-42-9P
IT	651048-45-2P	651048-46-3P	651048-47-4P
IT	651048-50-9P	651048-51-0P	651048-52-1P
IT	651048-55-4P	651048-56-5P	651048-57-6P
IT	651048-60-1P	651048-61-2P	651048-62-3P
IT	651048-65-6P	651048-66-7P	651048-67-8P
IT	651048-70-3P	651048-71-4P	651048-72-5P
IT	651048-75-8P	651048-76-9P	651048-77-0P
IT	651048-80-5P	651048-81-6P	651048-82-7P
IT	651048-85-0P	651048-86-1P	651048-87-2P
IT	651048-90-7P	651048-91-8P	651048-92-9P

651048-95-2P	651048-96-3P	651048-97-4P	651048-98-5P	651048-99-6P
651049-00-2P	651049-01-3P	651049-02-4P	651049-03-5P	651049-04-6P
651049-05-7P	651049-08-0P	651049-10-4P	651049-12-6P	651049-13-7P
651049-14-8P	651049-16-0P	651049-17-1P	651049-18-2P	651049-19-3P
651049-20-6P	651049-21-7P	651049-22-8P	651049-23-9P	651049-24-0P
651049-25-1P	651049-26-2P	651049-27-3P	651049-28-4P	651049-29-5P
651049-30-8P	651049-31-9P	651049-32-0P	651049-33-1P	651049-34-2P
651049-35-3P	651049-36-4P	651049-37-5P	651049-38-6P	651049-39-7P
651049-40-0P	651049-41-1P	651049-42-2P	651049-43-3P	651049-44-4P
651049-45-5P	651049-47-7P	651049-48-8P	651049-49-9P	651049-50-2P
651049-51-3P	651049-52-4P	651049-53-5P	651049-54-6P	651049-55-7P
651049-56-8P	651049-57-9P	651049-58-0P	651049-59-1P	651049-60-4P
651049-61-5P	651049-62-6P	651049-63-7P	651049-64-8P	651049-65-9P
651049-66-0P	651049-67-1P	651049-68-2P	651049-69-3P	651049-70-6P
651049-71-7P	651049-72-8P	651049-73-9P	651049-74-0P	651049-75-1P
651049-76-2P	651049-77-3P	651049-78-4P	651049-79-5P	651049-80-8P
651049-81-9P	651049-82-0P	651049-83-1P	651049-84-2P	651049-85-3P
651049-86-4P	651049-87-5P	651049-88-6P	651049-89-7P	651049-90-0P
651049-91-1P	651049-92-2P	651049-93-3P	651049-94-4P	651049-95-5P
651049-96-6P	651049-97-7P	651049-98-8P	651049-99-9P	651050-00-9P
651050-01-0P	651050-02-1P	651050-03-2P	651050-04-3P	651050-05-4P
651050-06-5P	651050-07-6P	651050-08-7P	651050-09-8P	651050-10-1P
651050-11-2P	651050-12-3P	651050-13-4P	651050-14-5P	651050-15-6P
651050-16-7P	651050-17-8P	651050-18-9P	651050-19-0P	651050-20-3P
651050-21-4P	651050-22-5P	651050-23-6P	651050-24-7P	651050-25-8P
651050-26-9P	651050-27-0P	651050-28-1P	651050-29-2P	651050-30-3P
651050-31-6P	651050-32-7P	651050-33-8P	651050-34-9P	651050-35-0P
651050-36-1P	651050-37-2P	651050-38-3P	651050-39-4P	651050-40-7P
651050-41-8P	651050-42-9P	651050-43-0P	651050-44-1P	651050-45-2P
651050-46-3P	651050-47-4P	651050-48-5P	651050-49-6P	651050-50-9P
651050-51-0P	651050-52-1P	651050-53-2P	651050-54-3P	651050-55-4P
651050-56-5P	651050-57-6P	651050-58-7P	651050-59-8P	651050-60-1P
651050-61-2P	651050-62-3P	651050-63-4P	651050-64-5P	651050-65-6P
651050-66-7P	651050-67-8P	651050-68-9P	651050-69-0P	651050-70-3P

RL: PAC (Pharmacological activity); SPN (Synthetic preparation);

THU (Therapeutic use); BIOL (Biological study); PREP

(preparation); USES (Uses)

(synthesis and therapeutic uses of ghrelin analogs)

L99 ANSWER 25 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN DUPLICATE 8

ACCESSION NUMBER: 2005:39282 CAPLUS Full-text

DOCUMENT NUMBER: 142:233614

TITLE: Novel ghrelin analogs with improved affinity for the

GH secretagogue receptor stimulate GH and prolactin

release from human pituitary cells

AUTHOR(S): Rubinfield, H.; Hadani, M.; Taylor, J. E.; Dong, J. Z.;

Comstock, J.; Shen, Y.; DeOliveira, D.; Datta, R.;

Culler, M. D.; Shimon, I.

CORPORATE SOURCE: Institute of Endocrinology, Chaim Sheba Medical

Center, Tel-Hashomer, 52621, Israel

SOURCE: European Journal of Endocrinology (2004), 151(6),

787-795

CODEN: EJOEP; ISSN: 0804-4643

PUBLISHER: BioScientifica Ltd.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin, a recently identified 28-amino acid peptide is a potent GH

secretagogue (GHS) produced predominantly by the stomach. Ghrelin stimulates

GH secretion through binding to the GHS receptor in the hypothalamus and



CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH,  
GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,  
KG, KZ, MD, RU, TJ, TM

PRIORITY APPLN. INFO.: US 2006-777016P P 20060227

AB Activation of nuclear factor KB (NF-KB) is involved in a number of diseases such as viral and bacterial infections, and cell proliferative disorders such as cancer and autoimmune disease. In certain instances, constitutive NF-KB activity has also been linked to the resistance of certain cancers to chemo and radiation therapy. The instant invention concerns method of inhibiting NF-KB activity in target cell populations by deliver of a polypeptide inhibitor of NF-KB (IKB). Methods of the invention may be used to treat diseases such as infections, and cell proliferative disorders. Methods for sensitizing cells to apoptosis and cytotoxic therapies are also described.

INCL 43525000; 435235100

CC 1-12 (Pharmacology)

IT INDEXING IN PROGRESS

IT Antitumor agents

Autoimmune disease

Bladder, neoplasm

Bone, neoplasm

Brain, neoplasm

Chemosensitizers, pharmaceutical

Cytotoxic agents

Esophagus, neoplasm

Gene therapy

Head and Neck, neoplasm

Human

Immunotherapy

Kidney, neoplasm

Leukemia

Liver, neoplasm

Lung, neoplasm

Mammary gland, neoplasm

Melanoma

Neoplasm

Ovary, neoplasm

Pancreas, neoplasm

Prostate gland, neoplasm

Radioisotizers, biological

Radiotherapy

Skin, neoplasm

Spleen, neoplasm

Testis, neoplasm

Uterus, neoplasm

(cervix; cell-targeted IKB for inhibition of NF-KB and treatment of diseases and combination with other agents)

(cell-targeted IKB for inhibition of NF-KB and treatment of diseases and combination with other agents)

(colon; cell-targeted IKB for inhibition of NF-KB and treatment of diseases and combination with other agents)

(head and neck; cell-targeted IKB for inhibition of NF-KB and treatment of diseases and combination with other agents)

Neoplasm, neoplasm

50-14-6D, Calciferol, conjugates with IKB 50-56-6D, Oxytocin, conjugates with IKB 51-21-8, 5-Fluorouracil 51-41-2D, Noradrenaline, conjugates with IKB 51-43-4D, Adrenaline, conjugates with IKB 51-48-9D, Thyroxine, conjugates with IKB

51-61-6D, Dopamine, conjugates with IKB 57-22-7, Vincristine 57-83-0D, Progesterone, conjugates with IKB 73-31-4D, Melatonin, conjugates with IKB 1393-25-5D, Secretin, conjugates with IKB 7689-03-4, Camptothecin 9002-60-2D, Adrenocorticotrophic hormone, conjugates with IKB 9002-61-3D, Human chorionic gonadotropin, conjugates with IKB 9002-62-4D, Prolactin, conjugates with IKB 9002-64-6D, Parathyroid hormone, conjugates with IKB 9002-67-9D, luteinizing hormone, conjugates with IKB 9002-68-0D, Follicle-stimulating hormone, conjugates with IKB 9002-71-5D, Thyroid-stimulating hormone, conjugates with IKB 9002-72-6D, Growth hormone, conjugates with IKB 9002-76-0D, Gastrin, conjugates with IKB 9004-10-8D, Insulin, conjugates with IKB 9007-12-9D, Calcitonin, conjugates with IKB 9007-92-5D, Glucagon, conjugates with IKB 9011-97-6D, Cholecystokinin, conjugates with IKB 9014-42-0D, Thrombopoietin, conjugates with IKB 9015-71-8D, Corticotropin-releasing hormone, conjugates with IKB 9034-39-3D, Growth hormone releasing hormone, conjugates with IKB 9034-40-6D, LH-RH, conjugates with IKB 9083-38-9D, MIF, conjugates with IKB 11000-17-2D, Antidiuretic hormone, conjugates with IKB 11002-13-4D, Angiotensinogen, conjugates with IKB 11096-26-7D, Erythropoietin, conjugates with IKB 15663-27-1, Cisplatin 23214-92-8, Doxorubicin 24305-27-9D, Thyrotropin-releasing hormone, conjugates with IKB 3222-06-3D, Calcitriol, conjugates with IKB 33069-62-4, Paclitaxel 33419-42-0, Etoposide 51110-01-1D, Somatostatin, conjugates with IKB 61912-98-9D, Insulin-like growth factor, conjugates with IKB 62031-54-3D, Fibroblast growth factor, conjugates with IKB 62229-50-9D, Epidermal growth factor, conjugates with IKB 67763-96-6D, insulin-like growth factor-1, conjugates with IKB 81627-83-0D, Macrophage-colony stimulating factor, conjugates with IKB 82785-45-3D, Neuropeptide Y, conjugates with IKB 83869-56-1D, Granulocyte-macrophage colony stimulating factor, conjugates with IKB 85637-73-6D, Atrial natriuretic peptide, conjugates with IKB 95058-81-4, Gemcitabine 106602-62-4D, Amylin, conjugates with IKB 106956-32-5D, Oncostatin M, conjugates with IKB 126339-09-1D, Peptide YY(3-36), conjugates with IKB 127464-60-2D, Vascular endothelial growth factor, conjugates with IKB 143011-72-7D, Granulocyte-colony stimulating factor, conjugates with IKB 169494-85-3D, Leptin, conjugates with IKB 179324-69-7, Velcade 304853-26-7D, Ghrelin, conjugates with IKB  
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(cell-targeted IKB for inhibition of NF-KB and treatment of diseases and combination with other agents)

L99 ANSWER 28 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2007:230501 CAPLUS Full-text

DOCUMENT NUMBER: 146:258657

TITLE: Fusion products of human serum albumin and therapeutic

proteins for use in the treatment of disease

INVENTOR(S): Rosen, Craig A.; Haseltine, William A.; Moore, Paul

A.; Bock, Jason B.; Bell, Adam; Shi, Yangu; Lafleur,

David W.

PATENT ASSIGNEE(S): Human Genome Sciences, Inc., USA

SOURCE: U.S. Pat. Appl. Publ., 182pp., Cont.-in-part of Appl. No. PCT/US2005/004041.

CODE: USXXCO

Patent

English

3

DOCUMENT TYPE:

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2007048282	A1	20070301	US 2006-500314	20060808
WO 2005077042	A2	20050825	WO 2005-US4041	20050209
WO 2005077042	A3	20061130		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, UA, UG, UZ, VC, VN, YU, ZA, ZM, ZW, SM			
RW:	BH, BH, GM, KE, LS, MA, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, RM, AZ, BY, BG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, CA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
PRIORITY APPLN. INFO.:				
			US 2004-542274P	P 20040209
			US 2004-549901P	P 20040305
			US 2004-556906P	P 20040329
			US 2004-636603P	P 20041217
			WO 2005-US4041	A2 20050209

AB Fusion products of human serum albumin with therapeutic proteins are described for use in the treatment and prevention of disease. Chimeric genes encoding these proteins are described for use in manufacture of the fusion protein. Preparation and use of fusion proteins of human serum albumin and brain natriuretic peptide is demonstrated.

INCL 424085700; 514012000; 530350000; 530351000; 530363000; 435069510;

CC 435069700; 435320100; 435325000

63-3 (Pharmaceuticals)

Section cross-reference(s): 3

IT Bone, disease

Cardiovascular system, disease

Growth disorders, animal

Immune disease

Kidney, disease

Metabolic disorders

Muscle, disease

Neoplasm

Neurotoxicity

Pain

(treatment of; fusion products of human serum albumin and therapeutic proteins for use in treatment of disease)

IT 9001-08-5DP, Butyrylcholinesterase, fusion products with human serum albumin 9001-67-6DP, Neuraminidase, fusion products with human serum albumin 9002-12-4DP, Uricase, fusion products with human serum albumin 9002-72-6DP, Somatotropin, fusion products with human serum albumin 9027-98-9DP, fusion products with human serum albumin 37228-64-1DP, fusion products with human serum albumin 62340-29-8DP, Oxyntomodulin, fusion products with human serum albumin 67763-96-6DP, IGF-1, fusion products with human serum albumin 83652-28-2DP, Calcitonin gene-related peptide, fusion products with human serum albumin 85637-73-6DP, Atrial natriuretic peptide, fusion products with human serum albumin

89750-14-1DP, Glucagon-like peptide I, fusion products with human serum albumin 106388-42-5DP, Peptide YY, fusion products with human serum albumin 116243-73-3DP, Endothelin, fusion products with human serum albumin 127830-04-0DP, C-Type natriuretic peptide, fusion products with human serum albumin 143863-92-7DP, Dendroaspis natriuretic peptide, fusion products with human serum albumin 154835-90-2DP, Adrenomedullin, fusion products with human serum albumin 165724-54-9DP, Long-acting natriuretic peptide, fusion products with human serum albumin 171714-28-6DP, 31-67-γ-Atrial natriuretic peptide, fusion products with human serum albumin 186207-03-4DP, TIMP-4, fusion products with human serum albumin 201615-39-6DP, Kallistatin peptide, fusion products with human serum albumin 304853-26-7DP, Ghrelin, fusion products with human serum albumin 388138-21-4DP, Metastatin, fusion products with human serum albumin 426206-97-5DP, β-Defensin 2, fusion products with human serum albumin

RL: BPN (Biosynthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses) (fusion products of human serum albumin and therapeutic proteins for use in treatment of disease)

L99 ANSWER: 29 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2007:175512 CAPLUS Full-text

DOCUMENT NUMBER: 146:229617

TITLE: Preparation of triptophan-derived triazole derivatives as ghrelin analogue ligands of growth hormone

SECRETAGOGUE RECEPTORS

INVENTOR(S): Perrissoud, Daniel; Martinez, Jean; Moulin, Aline;

Fehrentz, Jean-Alain; Boeglin, Damien; Demange, Luc

Zentaris GmbH, Germany; Le Centre National de la

Recherche Scientifique; University of Montpellier I;

University of Montpellier II

U.S. Pat. Appl. Publ., 123 pp.

SOURCE: CODE: USXXCO

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE

US 2007037857 A1 20070215 US 2006-502473 20060811

US 2007208061 A2 20070906

EP 1757290 A1 20070228 EP 2005-17732 20050816

R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,

IS, IT, LI, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL,

BA, HR, MK, YU

PRIORITY APPLN. INFO.:

OTHER SOURCE(S): MARPAT 146:229617

AB The invention provides novel triazole derivs. I [R1, R2 are H, (cyclo)alkyl,

(hetero)aryl, heterocyclyl, sulfonyl, etc.; one of R3 and R4 is H and the

other is (cyclo)alkyl, (hetero)aryl, heterocyclyl, sulfonyl, etc.; R5 is

(cyclo)alkyl, (hetero)aryl, sulfonyl, acyl, etc.; R6 is H, (cyclo)alkyl, or

cycloalkyl; n is 0-2] as ghrelin analog ligands of growth hormone

secretagogue receptors that are useful in the treatment or prophylaxis of

physiol. and/or pathophysiol. conditions in mammals, preferably humans, that

are mediated by GHS receptors. The invention further provides GHS receptor

antagonists and agonists that can be used for modulation of these receptors

and are useful for treating conditions such as growth retardation, cachexia,

US 2005-707941P P 20050815

EP 2005-17732 A 20050816

US 2006-787543P P 20060331

short-, medium- and/or long term regulation of energy balance or food intake, adipogenesis, adiposity and/or obesity, body weight gain and/or reduction, diabetes, tumor cell proliferation, inflammation, postoperative ileus and/or gastrectomy (ghrelin replacement therapy). Thus, compound II was prepared by reactions of Boc-protected D-tryptophan, 2,4-dimethoxybenzylamine, 3-(1H-indol-3-yl)propanoic hydrazide, and Boc-2-amino-2-methylpropanoic acid. A figure shows biol. activity of II, i.e., the calculated dose-response plots of the in vitro intracellular calcium release assay with human GHS-R1a transfected CHO cells (GHS antagonist values IC50 = 1.42 x 10<sup>-6</sup> and Kb = 1.23 x 10<sup>-8</sup> M).

INCL 514341000: 514383000

CC 34-3 (Amino Acids, Peptides, and Proteins)

Section cross-reference(s): 1, 2, 28

IT Alzheimer's disease

Anorexia

Anti-Alzheimer's agents

Anti-inflammatory agents

Antidepressants

Antidiabetic agents

Antihypertensives

Antibesity agents

Antitumor agents

Anxiety

Anxiolytics

Body weight

Cachexia

Cardiomyopathy

Central nervous system, disease

Cushing's syndrome

Energy balance

Feeding

Heart, disease

Heart failure

Hemostasis

Hunger

Hypertension

Hypothermia

Immunity

Immunodeficiency

Immunosuppression

Inflammation

Lipodystrophy

Lung, disease

Multiple sclerosis

Neoplasm

Obesity

Osteoporosis

Ovulation induction

Prader-Willi syndrome

Schizophrenia

Sleep disorders

Transplant and Transplantation

Turner syndrome

Wound healing

(preparation of tryptophan-derived triazole derivs. as ghrelin analog ligands of growth hormone secretagogue receptors)

Disease, animal

(wasting; preparation of tryptophan-derived triazole derivs. as ghrelin analog ligands of growth hormone secretagogue receptors)

304853-26-7Dp, Ghrelin, analogs 925238-36-4p 925238-37-5p

IT

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925238-38-6p 925238-39-7p 925238-40-0p 925238-41-1p 925238-42-2p  
 925238-43-3p 925238-44-4p 925238-45-5p 925238-46-6p 925238-47-7p  
 925238-48-8p 925238-49-9p 925238-50-2p 925238-51-3p 925238-52-4p  
 925238-53-5p 925238-54-6p 925238-55-7p 925238-56-8p 925238-57-9p  
 925238-58-0p 925238-59-1p 925238-60-4p 925238-61-5p 925238-62-6p  
 925238-63-7p 925238-64-8p 925238-65-9p 925238-66-0p 925238-67-1p  
 925238-68-2p 925238-69-3p 925238-70-4p 925238-71-5p 925238-72-6p  
 925238-73-6p 925238-74-7p 925238-75-1p 925238-76-2p 925238-77-3p  
 925238-78-4p 925238-79-5p 925238-80-8p 925238-81-9p 925238-82-0p  
 925238-83-1p 925238-84-2p 925238-85-3p 925238-86-4p 925238-87-5p  
 925238-88-6p 925238-89-7p 925238-90-0p 925238-91-1p 925238-92-2p  
 925238-93-3p 925238-94-4p 925238-95-5p 925238-96-6p 925238-97-7p  
 925238-98-8p 925238-99-9p 925239-00-5p 925239-01-6p 925239-02-7p  
 925239-03-8p 925239-04-9p 925239-05-0p 925239-06-1p 925239-07-2p  
 925239-08-3p 925239-09-4p 925239-10-7p 925239-11-8p 925239-12-9p  
 925239-13-0p 925239-14-1p 925239-15-2p 925239-16-3p 925239-17-4p  
 925239-18-5p 925239-19-6p 925239-20-9p 925239-21-0p 925239-22-1p  
 925239-23-2p 925239-24-3p 925239-25-4p 925239-26-5p 925239-27-6p  
 925239-28-7p 925239-29-8p 925239-30-1p 925239-31-2p 925239-32-3p  
 925239-33-4p 925239-34-5p 925239-35-6p 925239-36-7p 925239-37-8p  
 925239-38-9p 925239-39-0p 925239-40-3p 925239-41-4p 925239-42-5p  
 925239-43-6p 925239-44-7p 925239-45-8p 925239-46-9p 925239-47-0p  
 925239-48-1p 925239-49-2p 925239-50-5p 925239-51-6p 925239-52-7p  
 925239-53-8p 925239-54-9p 925239-55-0p 925239-56-1p 925239-57-2p  
 925239-58-3p 925239-59-4p 925239-60-7p 925239-61-8p 925239-62-9p  
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 925239-68-5p 925239-69-6p 925239-70-9p 925239-71-0p 925239-72-1p  
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 925239-78-7p 925239-79-8p 925239-80-1p 925239-81-2p 925239-82-3p  
 925239-83-4p 925239-84-5p 925239-85-6p 925239-86-7p 925239-87-8p  
 925239-88-9p 925239-89-0p 925239-90-3p 925239-91-4p 925239-92-5p  
 925239-93-6p 925239-94-7p 925239-95-8p 925239-96-9p 925239-97-0p  
 925239-98-1p 925239-99-2p 925240-00-2p 925240-01-3p 925240-02-4p  
 925240-03-5p 925240-04-6p 925240-05-7p 925240-06-8p 925240-07-9p  
 925240-08-0p 925240-09-1p 925240-10-4p 925240-11-5p 925240-12-6p  
 925240-13-7p 925240-14-8p 925240-15-9p 925240-16-0p 925240-17-1p  
 925240-18-2p 925240-19-3p 925240-20-6p 925240-21-7p 925240-22-8p  
 925240-23-9p 925240-24-0p 925240-25-1p 925240-26-2p

RL: PAC (Pharmacological activity); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP

(Preparation): USES (Uses)

(preparation of tryptophan-derived triazole derivs. as ghrelin analog

ligands of growth hormone secretagogue receptors)

L99 ANSWER 30 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2007:746488 CAPLUS Full-text

DOCUMENT NUMBER: 147:269463

TITLE: Exercise-induced suppression of acylated ghrelin in

humans

AUTHOR(S): Broom, D. R.; Stensel, D. J.; Bishop, N. C.; Burns, S.

F.; Miyashita, M.

School of Sport and Exercise Sciences, Loughborough

University, Leicestershire, UK

Journal of Applied Physiology (2007), 102(6),

2165-2171

CODEN: JAPHEV; ISSN: 8750-7587

American Physiological Society

Journal

English

PUBLISHER: American Physiological Society

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin is an orexigenic hormone secreted from endocrine cells in the stomach

and other tissues. Acylation of ghrelin is essential for appetite regulation.



Vigorous exercise induces appetite suppression, but this does not appear to be related to suppressed concns. of total ghrelin. This study examined the effect of exercise and feeding on plasma acylated ghrelin and appetite. Nine male subjects aged 19-15 yr participated in two, 9-h trials (exercise and control) in a random crossover design. Trials began at 0800 in the morning after an overnight fast. In the exercise trial, subjects ran for 60 min at 72% of maximum oxygen uptake between 0800 and 0900. After this, they rested for 8 h and consumed a test meal at 1100. In the control trial, subjects rested for 9 h and consumed a test meal at 1100. Area under the curve values for plasma acylated ghrelin concentration (assessed from venous blood samples) were lower over the first 3 h and the full 9 h of the exercise trial compared with the control trial:  $317 \pm 135$  vs.  $510 \pm 186$  pg  $\cdot$  ml $^{-1}$   $\cdot$  3 h and  $917 \pm 342$  vs.  $1,401 \pm 521$  pg  $\cdot$  ml $^{-1}$   $\cdot$  9 h (means  $\pm$  SE) resp. ( $P < 0.05$ ). Area under the curve values for hunger (assessed using a visual scale) were lower over the first 3 h of the exercise trial compared with the control trial ( $P = 0.013$ ). These findings demonstrate that plasma acylated ghrelin concentration and hunger are suppressed during running.

CC 2-6 (Mammalian Hormones)

ST Section cross-reference(s): 13

IT exercise acylated ghrelin appetite hunger

IT Appetite

IT 304853-26-7D, Ghrelin, acylated

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(plasma acylated ghrelin level was reduced during exercise in human)

REFERENCE COUNT: 51 THERE ARE 51 CITED REFERENCES AVAILABLE FOR THIS

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 31 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2007:261317 CAPLUS Full-text

DOCUMENT NUMBER: 146:435473

TITLE: Characterization of proghrelin peptides in mammalian

tissue and plasma

AUTHOR(S): Bang, Angela S.; Soule, Steven G.; Vandle, Tim G.;

Richards, A. Mark; Pemberton, Chris J.

CORPORATE SOURCE: Christchurch Cardioendocrine Research Group,

Department of Medicine, University of Otago,

Christchurch, 8140, N. Z.

SOURCE: Journal of Endocrinology (2007), 192(2), 313-323

CODEN: JOENAK; ISSN: 0022-0795

PUBLISHER: Society for Endocrinology

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin is a 28 amino acid stomach peptide, derived from proghrelin(1-94), that stimulates GH release, appetite and adipose deposition. Recently, a peptide derived from proghrelin(53-75) - also known as obestatin - has been reported to be a physiol. antagonist of ghrelin in the rat. Using four specific RIAs, we provide the first characterization of proghrelin(1-94) peptides in human plasma, their modulation by metabolic manipulation and their distribution in mammalian tissues. Ghrelin(1-28) immunoreactivity (IR) in human plasma and rat plasma/stomach consisted of major des-octanoyl and minor octanoylated forms, as determined by HPLC/RIA. Human plasma ghrelin(1-28) IR was significantly suppressed by food intake, oral glucose and 1 mg s.c. glucagon administration. Ghrelin(1-28) IR and proghrelin(29-94) IR peptide distributions in the rat indicated that the stomach and gastrointestinal tract contain the highest ants. of the peptides. Human and rat plasma and rat stomach exts. contained a major IR peak of proghrelin(29-94)-like peptide as determined by HPLC/RIA, whereas no obestatin IR was observed. Human plasma proghrelin(29-94)-like IR pos. correlated with ghrelin(1-28) IR, was significantly suppressed by food intake and oral glucose and shared with

ghrelin(1-28) IR a neg. correlation with body mass index. We found no evidence for the existence of obestatin as a unique, endogenous peptide. Rather, our data suggest that circulating and stored peptides derived from the carboxyl terminal of proghrelin (C-ghrelin) are consistent in length with proghrelin(29-94) and respond to metabolic manipulation, at least in man, in similar fashion to ghrelin(1-28).

CC 2-6 (Mammalian Hormones)

IT Body weight

(lean; characterization of mammalian plasma/tissue proghrelin peptides

and influence of food intake, oral glucose and glucagon administration)

IT 9034-39-3, Somatoliberin 37221-79-7, VIP 51110-01-1, Somatostatin

52906-92-0, Motilin 82785-45-3, Neuropeptide Y 89750-14-1, GIP-1

11745-44-9, Neuromedin U 126339-09-1 245359-74-4, Orexin (peptide)

304853-26-7D, Ghrelin, desoctanoyl

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(Characterization of mammalian plasma/tissue proghrelin peptides and

its cross reactivity with other peptides and hormones)

REFERENCE COUNT: 27 THERE ARE 27 CITED REFERENCES AVAILABLE FOR THIS

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 32 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2007:808457 CAPLUS Full-text

DOCUMENT NUMBER: 147:134801

TITLE: Variations in the preproghrelin gene correlate with

higher body mass index, fat mass, and body

dissatisfaction in young Japanese women

AUTHOR(S): Ando, Tetsuya; Ichimaru, Yuhel; Konjiki, Fujiko;

Shoji, Masayasu; Komaki, Gen

CORPORATE SOURCE: Department of Psychosomatic Research, National

Institute of Mental Health, National Center of

Neurology and Psychiatry, Kodaira, Tokyo, Japan

AMERICAN JOURNAL OF CLINICAL NUTRITION (2007), 86(1),

25-32

CODEN: AJCNAC; ISSN: 0002-9165

PUBLISHER: American Society for Nutrition

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Background: Ghrelin is an endogenous peptide that stimulates growth hormone secretion, enhances appetite, and increases body weight and may play a role in eating disorders. Objective: The purpose was to determine whether any preproghrelin gene variants are associated with anthropometric measures, circulating ghrelin, lipid concns., insulin resistance, or psychol. measures relevant to eating disorders in young women. Design: This cross-sectional study compared outcome measures between preproghrelin genotypes. The participants in the study included 264 Japanese women (university students with a mean ( $\pm$ SD) age of 20.4( $\pm$ 0.7) with no history of eating disorders. The main outcomes were responses to the Eating Disorder Inventory-2 (EDI-2), anthropometric measures, measures of depression and anxiety, and fasting blood concns. of acylated or desacyl ghrelin, lipids, glucose, and insulin.

Results: Two single nucleotide polymorphisms (SNPs) whose minor allele frequencies were >0.05-the Leu72Met (408C->A) SNP in exon 2 and the 3056 T->C SNP in intron 2-were used for association anal. The 3056C allele was

significantly associated with a higher acylated ghrelin concentration ( $P = 0.0021$ ), body weight ( $P = 0.011$ ), body mass index ( $P = 0.007$ ), fat mass ( $P = 0.012$ ), waist circumference ( $P = 0.008$ ), and skinfold thickness ( $P = 0.011$ )

and a lower HDL-cholesterol concentration ( $P = 0.02$ ). Interestingly, the 3056C allele was related to elevated scores in the Drive for Thinness-Body Dissatisfaction (DT-BD) subscale of the EDI-2 ( $P = 0.003$ ). Conclusion: Our

findings suggest that the preproghrelin gene 3056T->C SNP is associated with

changes in basal ghrelin concns. and phys. and psychol. variables related to eating disorders and obesity.

CC 2-6 (Mammalian Hormones)

IT Body weight

(lean; variations in preproghrelin gene correlated with insulin resistance, altered blood lipids, higher body mass index, fat mass, and body dissatisfaction in young Japanese women)

IT Body weight

(loss; variations in preproghrelin gene correlated with insulin resistance, altered blood lipids, higher body mass index, fat mass, and body dissatisfaction in young Japanese women)

IT 50-99-7, D-Glucose, biological studies 57-88-5, Cholesterol, biological studies 304853-26-7D, Ghrelin, acylated

RL: BSU (Biological study, unclassified): BIOL (Biological study) (variations in preproghrelin gene correlated with insulin resistance, altered blood lipids, higher body mass index, fat mass, and body dissatisfaction in young Japanese women)

REFERENCE COUNT: 50

THERE ARE 50 CITED REFERENCES AVAILABLE IN THE RE FORMAT RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 33 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2006:821729 CAPLUS Full-text

DOCUMENT NUMBER: 145:288954

TITLE:

Regulation of food intake by acyl and des-acyl

ghrelins in the goldfish

AUTHOR(S):

Matsuda, Kouhei; Miura, Tohru; Katsa, Hiroyuki; Maruyama, Keisuke; Shimakura, Sei-ichi; Uchiyama, Minoru; Kangawa, Kenji; Shioda, Seiji

CORPORATE SOURCE:

Laboratory of Regulatory Biology, Graduate School of Science and Engineering, University of Toyama, Toyama, 930-8555, Japan

SOURCE:

Peptides (New York, NY, United States) (2006), 27(9), 2321-2325

CODEN: PPTD5; ISSN: 0196-9781

PUBLISHER:

Elsevier Inc.

DOCUMENT TYPE:

Journal

LANGUAGE:

English

AB The authors' recent research has indicated that intracerebroventricular (ICV) and i.p. (IP) administration of n-octanoic acid-modified ghrelin (acyl ghrelin) stimulates food intake and locomotor activity in the goldfish. The manner in which peripherally administered acyl ghrelin regulates food intake, however, remains unclear. In contrast to acyl ghrelin, non-acylated ghrelin (des-acyl ghrelin) does not exert an orexigenic action or induce hypermotility. To this extent, the biol. role of des-acyl ghrelin in fish is unknown. Given the possible involvement of afferent pathways in mediating the effects of acyl ghrelin, as is known to occur in rodents, the authors examined the effect of capsaicin, a neurotoxin which destroys primary sensory (vagal and splanchnic) afferents, on the orexigenic activity induced by IP-injected acyl ghrelin. Pretreatment with IP-injected capsaicin (0.16  $\mu\text{mol/g}$  body weight [BW]) cancelled the orexigenic action of IP-injected acyl ghrelin (8  $\text{pmol/g}$  BW), although IP-injected capsaicin alone did not affect food intake. The effect of des-acyl ghrelin on the orexigenic action of acyl ghrelin in the goldfish was also investigated. The ICV and IP injection of des-acyl ghrelin at doses 3-10 times higher than that of acyl ghrelin suppressed the orexigenic action of ICV- and IP-injected acyl ghrelin (doses of 1 and 8  $\text{pmol/g}$  BW). In contrast, injection of des-acyl ghrelin alone did not show any inhibitory effect on food intake. These results suggest that, as is seen in rodents, circulating acyl ghrelin derived from peripheral tissues acts via primary sensory afferent pathways on feeding centers in the brain. The results also

show that des-acyl ghrelin inhibits acyl ghrelin-induced orexigenic activity in goldfish.

CC 12-6 (Nonmammalian Biochemistry)

ST goldfish des acyl ghrelin appetite sensory afferent

IT Appetite

Carassius auratus (regulation of food intake by acyl and des-acyl ghrelins in the goldfish)

IT 304853-26-7D, Ghrelin, des-n-octanoylated 304853-26-7D,

Ghrelin, n-octanoylated

RL: BSU (Biological study, unclassified): BIOL (Biological study) (regulation of food intake by acyl and des-acyl ghrelins in the goldfish)

REFERENCE COUNT: 31

THERE ARE 31 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 34 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2006:1210223 CAPLUS Full-text

DOCUMENT NUMBER: 146:356416

TITLE: Differential effects of gastric bypass and banding on

circulating gut hormone and leptin levels

Korner, Judith; Inabnet, William; Conwell, Irene M.; Taveras, Carmen; Daud, Anna; Olivero-Riviera, Lorraine; Restuccia, Nancy L.; Bessler, Marc

CORPORATE SOURCE:

Department of Medicine, College of Physicians and Surgeons, Columbia University, New York, NY, USA

Obesity (2006), 14(9), 1553-1561

CODEN: OBESAX; ISSN: 1930-7381

PUBLISHER:

North American Association for the Study of Obesity

DOCUMENT TYPE:

Journal

English

AB Objective: To quantify plasma concns. of hormones that regulate energy homeostasis in order to establish possible mechanisms for greater weight loss after Roux-en-Y gastric bypass (RYGBP) compared with gastric banding (BND). Research Methods and Procedures: Four groups of women were studied: lean (n = 8; mean BMI, 21.6 kg/m<sup>2</sup>); BND (n = 9; BMI, 35.8; 25% weight loss); RYGBP (n = 9; BMI, 34.2; 36% weight loss), and controls matched for BMI to the surgical group (n = 11; BMI, 34.4). Results: Fasting total peptide YY (PYY) and PYY(3-36) immunoreactivity were similar among all groups, but the postprandial response in the RYGBP group was exaggerated, such that 30 min after the meal, total and PYY(3-36) levels were 2- to 4-fold greater compared with all other groups. Maximal postprandial suppression of total ghrelin was blunted in the BND group (13%) compared with RYGBP (27%). Postprandial suppression of octanoylated ghrelin was also less in BND (29%) compared with RYGBP (56%).

Fasting insulin was lower in RYGBP (6.6  $\mu\text{U/mL}$ ) compared with BND (10.0  $\mu\text{U/mL}$ ). Compared with lean controls, leptin concns. were significantly higher in BND but not in RYGBP. There was a greater increase in post-meal satiety in the RYGBP group compared with BND and overweight controls. Discussion: The differences between RYGBP and BND subjects in postprandial concns. of PYY and ghrelin would be expected to promote increased satiety and earlier meal termination in RYGBP and may aid in greater weight loss. The differences in insulin and leptin concns. associated with these procedures may also reflect differences in insulin sensitivity and energy partitioning.

CC 14-14 (Mammalian Pathological Biochemistry)

Section cross-reference(s): 2

IT Blood plasma

Body weight

Human

Hunger

Obesity

Postprandial period  
(differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

IT Body weight  
(loss; differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

IT Appetite  
(satiety; differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

IT 169494-85-3, lepin 304853-26-7, Ghrelin 304853-26-7D,

Ghrelin, octanoylated

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(differential effects of gastric bypass and banding on circulating gut hormone and leptin levels)

REFERENCE COUNT: 56 THERE ARE 56 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 35 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2006:521474 CAPLUS Full-text

DOCUMENT NUMBER: 144:487839

TITLE: Carob pulp preparation rich in insoluble dietary fiber and polyphenols enhances lipid oxidation and lowers postprandial acylated ghrelin in humans

AUTHOR(S): Gruendel, Sindy; Garcia, Ada L.; Otto, Baerbel; Mueller, Corinna; Steiniger, Jochen; Weickert, Martin O.; Speh, Maria; Katt, Norbert; Koebnick, Corinna  
Dietary Fiber and the Metabolic Syndrome Group, German Institute of Human Nutrition Potsdam-Rehbruecke, Nuthetal, Germany

CORPORATE SOURCE: Journal of Nutrition (2006), 136(6), 1533-1538

SOURCE: CODE: JONUAI; ISSN: 0022-3166

PUBLISHER: American Society for Nutrition

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin is an orexigenic hormone that may affect substrate utilization in humans. Ghrelin is influenced by macronutrients, but the effects of insol. dietary fiber and polyphenols are unknown. We investigated the effects of a polyphenol-rich insol. dietary fiber preparation from carob pulp (carob fiber) on postprandial ghrelin responses and substrate utilization. Dose-dependent effects of the consumption of carob fiber were investigated in a randomized, single-blind, crossover study in 20 healthy subjects, aged 22-62 yr. Plasma total and acylated ghrelin, triglycerides, and serum insulin and nonesterified fatty acids (NEFA) levels were repeatedly assessed before and after ingestion of an isocaloric standardized liquid meal with 0, 5, 10, or 20 g of carob fiber over a 300-min period. The RQ was determined after consumption of 0 or 20 g of carob fiber. Carob fiber intake lowered acylated ghrelin to 49.1%, triglycerides to 97.2%, and NEFA to 67.2% compared with the control meal ( $P < 0.001$ ). Total ghrelin and insulin concns. were not affected by consumption of a carob fiber-enriched liquid meal. Postprandial energy expenditure was increased by 42.3% and RQ was reduced by 99.9% after a liquid meal with carob fiber compared with a control meal ( $P < 0.001$ ). We showed that the consumption of a carob pulp preparation, an insol. dietary fiber rich in polyphenols, decreases postprandial responses of acylated ghrelin, triglycerides, and NEFA and alters RQ, suggesting a change toward increased fatty acid oxidation. These results indicate that carob fiber might exert beneficial effects in energy intake and body weight

CC 18-4 (Animal Nutrition)

IT Blood plasma

Blood serum

Body weight

Cerantonia siliqua  
Dietary fiber  
Dietary supplements  
Energy metabolism, animal  
Human  
Lipid oxidation  
Postprandial period  
Respiration, animal

(carob pulp preparation rich in insol. dietary fiber and polyphenols enhances lipid oxidation and lowers postprandial acylated ghrelin in humans)

IT 50-99-7, D-Glucose, biological studies 9004-10-8, Insulin, biological studies 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, acylated  
RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(carob pulp preparation rich in insol. dietary fiber and polyphenols enhances lipid oxidation and lowers postprandial acylated ghrelin in humans)

REFERENCE COUNT: 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 36 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2006:517379 CAPLUS Full-text

DOCUMENT NUMBER: 145:59635

TITLE: Stimulatory effect of n-octanoylated ghrelin on

locomotor activity in the goldfish, *Carassius auratus*

Matsuda, Kouhei; Miura, Tohru; Kalya, Hiroyuki;

Mariyama, Keisuke; Uchiyama, Minoru; Kangawa, Kenji;

Shioda, Seiji

Laboratory of Regulatory Biology, Graduate School of

Science and Engineering, University of Toyama, Toyama,

930-8555, Japan

Peptides (New York, NY, United States) (2006), 27(6),

1335-1340

CODEN: PPTDD5; ISSN: 0196-9781

PUBLISHER: Elsevier Inc.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin is implicated in growth and feeding regulation in fish. The influence of ghrelin on behavior has not been well studied and the physiol. role of des-fatty acid modification of this peptide is unclear. Therefore, the effects of intracerebroventricular (ICV) and i.p. (IP) administration of synthetic n-octanoylated (acyl) goldfish ghrelin and des-n-octanoylated (des-acyl) ghrelin on locomotor and orexigenic activity in the goldfish were examined. ICV administration of acyl ghrelin at doses of 1 and 2 pmol/g body weight (BW) and IP administration at 16 pmol/g BW both induced significant increases in locomotor activity during for 45-60 min after treatment. Cumulative food intake was significantly increased by ICV injection of acyl ghrelin at doses of 1 and 2 pmol/g BW and IP injection at 8 and 16 pmol/g BW during the 60-min post-treatment observation period. In contrast, ICV and IP administration of des-acyl ghrelin produced no changes in locomotor and orexigenic activity. The authors also analyzed fasting-induced changes in the expression of ghrelin mRNA in the brain and intestine using a real-time PCR method. The level of ghrelin mRNA in the intestine, but not in the brain, obtained from fish fasted for 7 days was significantly higher than that in fish that had been fed normally. These results suggest that, in the goldfish, acyl ghrelin, but not des-acyl ghrelin, stimulates locomotor activity and enhances food intake via central and peripheral pathways.

CC 12-6 (Nonmammalian Biochemistry)

ST goldfish ghrelin locomotor behavior appetite

IT Appetite

Brain  
Carrissius auratus  
Fasting  
Intestine

(stimulatory effect of n-octanoylated ghrelin on locomotor activity in the goldfish)

IT 304853-26-7D, Ghrelin, des-n-octanoylated 304853-26-7D,

Ghrelin, n-octanoylated

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(stimulatory effect of n-octanoylated ghrelin on locomotor activity in the goldfish)

REFERENCE COUNT: 37 THERE ARE 37 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 37 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2006:764163 CAPLUS Full-text

DOCUMENT NUMBER: 146:7036

TITLE: Physiogenomic analysis of weight loss induced by

dietary carbohydrate restriction

AUTHOR(S): Ruano, Gualberto; Windemuth, Andreas; Kocherla, Mohan;

Hoford, Theodore; Fernandez, Maria Luz; Forsythe,

Cassandra E.; Wood, Richard J.; Kraemer, William J.;

Volek, Jeff S.

GENOMAS, Inc., Hartford, CT, 06106, USA

CORPORATE SOURCE: Nutrition & Metabolism (2006), 3, No pp. given

SOURCE: CODEN: NMEAZ; ISSN: 1743-7075

URL: <http://www.nutritionandmetabolism.com/content/pdf/1743-7075-3-20.pdf>

PUBLISHER: BioMed Central Ltd.

DOCUMENT TYPE: Journal; (online computer file)

LANGUAGE: English

AB Background: Diets that restrict carbohydrate (CHO) have proven to be a successful dietary treatment of obesity for many people, but the degree of weight loss varies across individuals. The extent to which genetic factors associate with the magnitude of weight loss induced by CHO restriction is unknown. The authors examined assocns. among polymorphisms in candidate genes and weight loss to understand the physiol. factors influencing body weight responses to CHO restriction. Methods: The authors screened for genetic assocns. with weight loss in 86 healthy adults who were instructed to restrict CHO to a level that induced a small level of ketosis (CHO approx. 10% of total energy). A total of 27 single nucleotide polymorphisms (SNPs) were selected from 15 candidate genes involved in fat digestion/metabolism, intracellular glucose metabolism, lipoprotein remodeling, and appetite regulation. Multiple linear regression was used to rank the SNPs according to probability of association, and the most significant assocns. were analyzed in greater detail. Results: Mean weight loss was 6.4 kg. SNPs in the gastric lipase (LIPF), hepatic glycogen synthase (GYS2), cholesteryl ester transfer protein (CETP) and galanin (GAL) genes were significantly associated with weight loss. Conclusion: A strong association between weight loss induced by dietary CHO restriction and variability in genes regulating fat digestion, hepatic glucose metabolism, intravascular lipoprotein remodeling, and appetite were detected. These discoveries could provide clues to important physiol. adaptations underlying the body mass response to CHO restriction.

CC 18-4 (Animal Nutrition)

IT Body weight

(loss; physiogenomics of weight loss induced by dietary carbohydrate restriction)

IT 9001-62-1, Lipase 9004-02-8, Lipoprotein lipase 9014-56-6, Glycogen

synthase 9026-00-0, Lysosomal acid lipase 9043-29-2, Endothelial

lipase 82785-45-3, Neuropeptide Y 119418-04-1, Galanin

304853-26-7D, Ghrelin, precursor

RL: BSU (Biological study, unclassified); BIOL (Biological study) (physiogenomics of weight loss induced by dietary carbohydrate restriction)

REFERENCE COUNT: 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 38 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2005:1329098 CAPLUS Full-text

DOCUMENT NUMBER: 144:45727

TITLE: Ghrelin regulator comprising C6-12 or C8-10 fatty

acids or derivatives for food and pharmaceutical use

INVENTOR(S): Kojima, Masayasu; Nishi, Yoshihiro; Kangawa, Kenji;

Abe, Keiichi; Izumi, Reiko; Nakamura, Junichi

PATENT ASSIGNEE(S): Kurume University, Japan; Suntory Limited

SOURCE: PCT Int. Appl., 62 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: Japanese

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE

WO 2005120485 A1 20051222 WO 2005-JP7465 20050419

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,

GE, GH, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC,

GE, GH, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ,

LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NA,

NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL,

SM, SY, TJ, TM, TN, TR, TT, UA, UG, UZ, VN, YU, ZA,

ZM, ZW

RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM,

AE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT,

RO, SE, SI, SK, TR, BF, BJ, CG, CI, CM, GA, GN, GQ, GW, ML,

MR, NE, SN, TD, TG

WO 2005120484 A1 20051222 WO 2004-JP15413 20041019

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH,

GE, GH, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC,

GE, GH, GR, GU, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC,

LC, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NA, NI,

NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY,

TJ, TM, TN, TR, TT, UA, UG, UZ, VN, YU, ZA, ZM, ZW

RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM,

AE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LU, MC, NL, PL, PT, RO, SE,

SI, SK, TR, BF, BJ, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE,

SN, TD, TG

AU 2005251576 A1 20051222 AU 2005-251576 20050419

CA 2569678 A1 20051222 CA 2005-2569678 20050419

EP 1767198 A1 20070328 EP 2005-734737 20050419

R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE,

IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR

KR 2007043710 A 20070425 KR 2006-725994 20061208

PRIORITY APPLN. INFO.:

JP 2004-171245 A 20040609

WO 2005-JP7465 W 20050419

AB A regulator for regulating the physiol. functions, such as activity of

increasing an intracellular calcium ion concentration, activity of promoting

growth hormone secretion, activity of promoting eating, regulatory activity

relating to fat accumulation, activity of ameliorating heart function and activity of stimulating gastric acid secretion, of ghrelin, which regulator comprises a C2-35 fatty acids or their derivs. These ghrelin regulators are useful as functional food (or feed) and pharmaceutical to e.g. enhance phys. strength and beautify skin.

IC ICM A61K031-19  
ICS A61K031-20; A61K031-22; A61K031-23; A61P001-04; A61P001-14;  
A61P003-00; A61P003-02; A61P003-04; A61P005-08; A61P009-00;  
A61P017-02; A61P019-02; A61P019-10; A23J001-30  
CC 2-10 (Mammalian Hormones)  
Section cross-reference(s): 5, 17, 18, 63  
IT Animals  
Anorexia  
Domestic animal  
Drug delivery systems  
Drugs  
Feed  
Feed additives  
Food  
Food additives  
Human  
Malnutrition  
Mammalia  
(ghrelin regulator comprising C6-12 or C8-10 fatty acids or derivs. for food and pharmaceutical use)  
IT 304853-26-7D, Ghrelin, acylated derivs.  
RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(ghrelin regulator comprising C6-12 or C8-10 fatty acids or derivs. for food and pharmaceutical use)  
REFERENCE COUNT: 20 THERE ARE 20 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT  
L99 ANSWER 39 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2005:1259412 CAPLUS Full-text  
DOCUMENT NUMBER: 144:21844  
TITLE: Immunotherapy of obesity and appetite disorders  
INVENTOR(S): Charlton, Keith; Porter, Andrew; Strachan, Gillian  
PATENT ASSIGNEE(S): Haptogen Ltd., UK  
SOURCE: PCT Int. Appl., 61 pp.  
CODEN: FIXXD2  
DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:  
PATENT NO. KIND DATE APPLICATION NO. DATE  
WO 2005113600 A2 20051201 WO 2005-GB1916 20050518  
WO 2005113600 A3 20060608  
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, ST, TJ, TH, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW  
RW: BW, GM, GW, KE, LS, MW, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, MC, NL, PL, PT,

RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GG, GW, ML, MR, NE, SN, TD, TG  
PRIORITY APPLN. INFO.: MARPAT 144:21844 GB 2004-11014 A 20040518  
OTHER SOURCE(S):

AB The authors disclose methods for regulating food intake and weight gain/loss by selectively modulating the extracellular concentration of endogenous cannabinoid and digestive tract hormones. In one example, arachidonic acid derivs. are conjugated to carrier proteins and used to elicit rodent antibodies or to select antibodies from human libraries/. Furthermore, the conjugates may have application as vaccines.

IC ICM C07K016-00  
CC 15-3 (Immunochemistry)  
Section cross-reference(s): 14  
ST antibody endocannabinoid immunotherapy obesity appetite disorder; ghrelin antibody immunotherapy obesity appetite disorder; neuropeptide Y antibody immunotherapy obesity appetite disorder  
IT Antiobesity agents  
Appetite depressants  
Appetite stimulants  
(antibodies to endocannabinoids or digestive tract hormones derivs.)  
IT Human  
(antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)  
IT Cannabinoids  
RL: BSU (Biological study, unclassified); BIOL (Biological study)  
(endocannabinoids; antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)  
IT Antibodies and immunoglobulins  
RL: BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(monoclonal; to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)  
IT Phage display library  
(of antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)  
IT Vaccines  
(of endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)  
IT Immunotherapy  
(of obesity or appetite disorders)  
IT Antibodies and immunoglobulins  
RL: BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(single chain, 3AB12, 4AD8, 3BE10 or 3BH10; to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)  
IT 53847-30-6, 2-Arachidonylglycerol 94421-68-8, Anandamide 106388-42-5, Peptide YY 304853-26-7D, Ghrelin, derivs. 307950-60-3D, 3-acylserine derivs. 313951-59-6D, 3-acylserine derivs. 869989-42-4D, 3-acylserine derivs. 869989-43-5D, 3-acylserine derivs. 870491-49-9  
RL: BSU (Biological study, unclassified); PRP (Properties); BIOL (Biological study)  
(antibodies to endocannabinoids or digestive tract hormones derivs. for immunotherapy of obesity or appetite disorders)

L99 ANSWER 40 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
ACCESSION NUMBER: 2005:1239564 CAPLUS Full-text

DOCUMENT NUMBER: 144:945  
 TITLE: Methods of inhibiting proinflammatory cytokine expression using ghrelin  
 INVENTOR(S): Dixit, Vishwa Deep; Taub, Dennis D.  
 PATENT ASSIGNEE(S): The Government of the United States of America, As Represented by the Secretary Department of Health and Human Services National Institutes of Health, USA  
 SOURCE: PCT Int. Appl., 88 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE  
 WO 2005110463 A1 20051124 WO 2005-US16565 20050511  
 W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW  
 RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CH, CY, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, RU, SC, SD, SE, SI, SK, TR, MR, NE, SN, TD, TG  
 CA 2566703 A1 20051124 CA 2005-2566703 20050511  
 EP 1750745 A1 20070214 EP 2005-747960 20050511  
 R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, RU, SC, SD, SE, SI, SK, TR  
 PRIORITY APPL. INFO.: US 2004-569819P P 20040511  
 WO 2005-US16565 W 20050511

AB The present invention provides a method of inhibiting proinflammatory cytokine expression using ghrelin. Also provided by the invention is a method of treating loss of appetite and sepsis comprising administering ghrelin or a fragment thereof.

IC ICM A61K038-17  
 CC ICS A61P029-00; A61P003-00; A61P031-00  
 ST Inflammation inhibition sepsis appetite disorder treatment  
 IT Ghrelin  
 IT Asthma  
 IT Autoimmune disease  
 IT Burn  
 IT Hepatotoxicity  
 IT Mycosis  
 IT Neoplasm  
 IT Transplant rejection  
 IT (inflammation associated with; methods of inhibiting proinflammatory cytokine expression using ghrelin, its cDNA, and fragments thereof)  
 IT Anorexia  
 IT Appetite stimulants  
 IT Eating disorders  
 IT (method of treating loss of appetite with ghrelin)  
 IT 304853-26-7; Ghrelin 304853-26-7D; Ghrelin, fragments  
 RL: PAC (Pharmacological activity); THU (Therapeutic use); B10L (Biological study); USES (Uses)

(methods of inhibiting proinflammatory cytokine expression using ghrelin, its cDNA, and fragments thereof)  
 REFERENCE COUNT: 16  
 THERE ARE 16 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 41 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
 ACCESSION NUMBER: 2005:1103612 CAPLUS Full-text  
 DOCUMENT NUMBER: 143:385164  
 TITLE: Antibody specific to mammalian endogenous ligand without neutralizing activity for stabilizing ligand and enhancing receptor activity to treat diseases  
 INVENTOR(S): Inooka, Hiroshi; Suzuki, Nobuhiro; Kokubo, Toshio; Kurokawa, Tomofumi  
 PATENT ASSIGNEE(S): Takeda Pharmaceutical Company Limited, Japan  
 SOURCE: PCT Int. Appl., 98 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: Japanese  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE  
 WO 2005094881 A1 20051013 WO 2005-JP6576 20050329  
 W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW  
 RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, BG, CH, CY, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, RU, SC, SD, SE, SI, SK, TR, MR, NE, SN, TD, TG  
 CA 2561732 A1 20051013 CA 2005-2561732 20050329  
 EP 1731168 A1 20061213 EP 2005-721715 20050329  
 R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, MC, NL, PL, PT, RO, RU, SC, SD, SE, SI, SK, TR  
 US 2007202099 A1 20070830 US 2006-594773 20060929  
 PRIORITY APPL. INFO.: JP 2004-98595 A 20040330  
 WO 2005-JP6576 W 20050329

AB An ameliorating agent for the stability of mammalian endogenous ligand in the blood, comprising an antibody having affinity with mammalian endogenous ligand and substantially not neutralizing the same; and preps. thereof for the prevention and treatment of diseases in accomplishment of which it is effective to increase the concentration of endogenous ligand in the blood and/or prolong the half life period thereof in the blood. When the preps. alone without being combined with a compound identical with or substantially identical with the endogenous ligand are administered to a mammal, the stability of endogenous ligand in the blood would be enhanced to thereby reinforce the receptor activity regulating action thereof. The endogenous ligand belonging to the secretin/glucagon superfamily is selected from GLP-1, calcitonin, PACAP, VIP, LHRH, metakin, GPR7/GPR8 ligand, MSH, ghrelin, apelin, EPO, TPO, insulin, interferon, growth hormone, GM-CSF, leptin, adiponectin, ANP, BNP, CNP, betacellulin, betacellulin-y4, adrenomedullin.  
 IC ICM A61K039-395  
 ICS A61K047-48; A61P003-00; A61P005-02; A61P005-06; A61P005-18;  
 A61P005-48; A61P007-00; A61P009-00; A61P015-00; A61P015-10;  
 A61P015-18; A61P019-08; A61P025-00; A61P031-00; A61P035-00;



2005:269024 CAPLUS Full-text  
 142:310203  
 Effect of centrally administered C75, a fatty acid  
 synthase inhibitor, on ghrelin secretion and its  
 downstream effects  
 Hu, Zhiyuan; Cha, M. Daniel  
 Wang, Jing; Lane, M. Daniel  
 Department of Biological Chemistry, The Johns Hopkins  
 University School of Medicine, Baltimore, MD, 21205,  
 USA  
 Proceedings of the National Academy of Sciences of the  
 United States of America (2005), 102(11), 3972-3977  
 CODEN: PNAS6; ISSN: 0027-8424  
 National Academy of Sciences  
 PUBLISHER: Journal  
 DOCUMENT TYPE: English  
 LANGUAGE: English  
 AB The central administration of the fatty acid synthase (FAS) inhibitor, C75,  
 rapidly suppresses the expression of orexigenic neuropeptides [neuropeptide Y  
 (NPY) and agouti-related protein (AgRP)] and activates expression of  
 anorexigenic neuropeptides [proopiomelanocortin (POMC) and cocaine- and  
 amphetamine-regulated transcript (CART)] in the hypothalamus. The combined  
 actions of these changes inhibit food intake and decrease body weight.  
 Intracerebroventricular injection of C75 appears to rapidly inhibit the  
 secretion of ghrelin by hypothalamic explants *ex vivo* and by the stomach *in*  
*vivo*. Ghrelin administered intracerebroventricularly reverses the anorexic  
 effect of C75, suggesting that C75 acts upstream of ghrelin. Because ghrelin-  
 producing neurons are known to form synapses onto NPY/AgRP neurons, the  
 authors suggest that the reversal of C75-induced anorexia by ghrelin may be  
 mediated by NPY/AgRP neurons. This hypothesis is supported by the finding  
 that ghrelin reverses the C75-induced inactivation (assessed by c-Fos  
 expression) of neurons in the arcuate nucleus that express NPY (assessed by  
 immunohistochem. staining). These effects closely correlate with  
 appropriate changes down-stream in the expression of the hypothalamic  
 neuropeptides that regulate feeding behavior, i.e., down-regulation of the  
 expression of NPY and AgRP and up-regulation of the expression of  
 proopiomelanocortin/ $\alpha$ -MSH, provoked by C75 and reversed by ghrelin. The  
 authors propose a model in which ghrelin secretion plays an intermediary role  
 between malonyl-CoA, the substrate of fatty acid synthase, and the neural  
 circuitry regulating energy homeostasis.  
 CC 2-6 (Mammalian Hormones)  
 ST fatty acid synthase brain ghrelin hypothalamus neuropeptide  
 appetite  
 IT Anorexia  
 Appetite  
 Body weight  
 Brain  
 Energy metabolism, animal  
 Stomach  
 (centrally administered fatty acid synthase inhibitor effect on ghrelin  
 secretion and its downstream effects)  
 IT 524-14-1, Malonyl-CoA 9045-77-6, Fatty acid synthase 37213-49-3,  
 $\alpha$ -MSH 66796-54-1, Proopiomelanocortin 82785-45-3, Neuropeptide Y  
 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, des-n-octanoyl  
 derivs.  
 RL: BSU (Biological study, unclassified); BIOL (Biological study)  
 (centrally administered fatty acid synthase inhibitor effect on ghrelin  
 secretion and its downstream effects)  
 REFERENCE COUNT: 34  
 THERE ARE 34 CITED REFERENCES AVAILABLE FOR THIS  
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

2005:473171 CAPLUS Full-text  
 143:38596  
 Molecular forms of hypothalamic ghrelin and its  
 regulation by fasting and 2-deoxy-D-glucose  
 administration  
 Sato, Takahiro; Fukue, Yoshihiko; Teranishi, Hitoshi;  
 Yoshida, Yayoi; Kojima, Masayasu  
 Molecular Genetics, Institute of Life Sciences, Kurume  
 University, Fukuoka, 839-0864, Japan  
 Endocrinology (2005), 146(6), 2510-2516  
 CODEN: ENDOAO; ISSN: 0013-7227  
 Endocrine Society  
 PUBLISHER: Journal  
 DOCUMENT TYPE: English  
 LANGUAGE: English  
 AB Ghrelin, an endogenous ligand for the GH secretagogue receptor, is a hormone  
 expressed in stomach and other tissues, such as hypothalamus, testis, and  
 placenta. This hormone acts at a central level to stimulate GH secretion and  
 food intake. Little is known, however, about the mol. forms and physiol.  
 roles of ghrelin within the hypothalamus. The authors detail the mol. forms,  
 mRNA expression patterns, and peptide contents of ghrelin within the rat  
 hypothalamus. Using the combination of reverse-phase HPLC and ghrelin-  
 specific RIA, the authors determined that the rat hypothalamus contains both  
 n-octanoyl-modified and des-acyl ghrelin. Fasting for 24 and 48 h  
 significantly decreased ghrelin mRNA expression in the hypothalamus to 24% and  
 28% of control values, resp. Both n-octanoyl-modified and des-acyl ghrelin  
 content in the hypothalamus decreased after 24 and 48 h of fasting. These  
 results contrast the changes in gastric ghrelin after fasting, which decreased  
 in content despite increased mRNA expression. Two hours after injection of 2-  
 deoxy-D-glucose (2-DG), a selective blocker of carbohydrate metabolism,  
 ghrelin peptide levels also decreased. Thus, induction of glucoprivic states,  
 such as fasting and 2-DG treatment, decreased ghrelin gene expression and  
 peptide content within the hypothalamus.  
 CC 2-6 (Mammalian Hormones)  
 IT Section cross-reference(s): 18  
 Fasting  
 Stomach  
 (mol. forms of hypothalamic ghrelin and its regulation in  
 glucoprivation by fasting and deoxyglucose administration)  
 IT 50-99-7, D-Glucose, biological studies 67382-96-1, Melanin-concentrating  
 hormone 82785-45-3, Neuropeptide Y 304853-26-7, Ghrelin  
 304853-26-7D, Ghrelin, n-octanoyl-modified and des-acyl derivs.  
 RL: BSU (Biological study, unclassified); BIOL (Biological study)  
 (mol. forms of hypothalamic ghrelin and its regulation in  
 glucoprivation by fasting and deoxyglucose administration)  
 REFERENCE COUNT: 21  
 THERE ARE 21 CITED REFERENCES AVAILABLE FOR THIS  
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

2005:59399 CAPLUS Full-text  
 142:132304  
 Effects of Roux-en-Y gastric bypass surgery on fasting  
 and postprandial concentrations of plasma ghrelin,  
 peptide YY, and insulin  
 Korner, Judith; Bessler, Marc; Cirilo, L. J.; Conwell,  
 Irene M.; Daud, Anna; Restuccia, Nancy L.; Wardlaw,  
 Sharon L.  
 Department of Medicine, College of Physicians &  
 Surgeons, Columbia University, New York, NY, 10032,  
 USA  
 PUBLISHER: Journal  
 DOCUMENT TYPE: English  
 LANGUAGE: English  
 AB Ghrelin, an endogenous ligand for the GH secretagogue receptor, is a hormone  
 expressed in stomach and other tissues, such as hypothalamus, testis, and  
 placenta. This hormone acts at a central level to stimulate GH secretion and  
 food intake. Little is known, however, about the mol. forms and physiol.  
 roles of ghrelin within the hypothalamus. The authors detail the mol. forms,  
 mRNA expression patterns, and peptide contents of ghrelin within the rat  
 hypothalamus. Using the combination of reverse-phase HPLC and ghrelin-  
 specific RIA, the authors determined that the rat hypothalamus contains both  
 n-octanoyl-modified and des-acyl ghrelin. Fasting for 24 and 48 h  
 significantly decreased ghrelin mRNA expression in the hypothalamus to 24% and  
 28% of control values, resp. Both n-octanoyl-modified and des-acyl ghrelin  
 content in the hypothalamus decreased after 24 and 48 h of fasting. These  
 results contrast the changes in gastric ghrelin after fasting, which decreased  
 in content despite increased mRNA expression. Two hours after injection of 2-  
 deoxy-D-glucose (2-DG), a selective blocker of carbohydrate metabolism,  
 ghrelin peptide levels also decreased. Thus, induction of glucoprivic states,  
 such as fasting and 2-DG treatment, decreased ghrelin gene expression and  
 peptide content within the hypothalamus.  
 CC 2-6 (Mammalian Hormones)  
 IT Section cross-reference(s): 18  
 Fasting  
 Stomach  
 (mol. forms of hypothalamic ghrelin and its regulation in  
 glucoprivation by fasting and deoxyglucose administration)  
 IT 50-99-7, D-Glucose, biological studies 67382-96-1, Melanin-concentrating  
 hormone 82785-45-3, Neuropeptide Y 304853-26-7, Ghrelin  
 304853-26-7D, Ghrelin, n-octanoyl-modified and des-acyl derivs.  
 RL: BSU (Biological study, unclassified); BIOL (Biological study)  
 (mol. forms of hypothalamic ghrelin and its regulation in  
 glucoprivation by fasting and deoxyglucose administration)  
 REFERENCE COUNT: 21  
 THERE ARE 21 CITED REFERENCES AVAILABLE FOR THIS  
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT



- CORPORATE SOURCE:** USA  
**SOURCE:** Journal of Clinical Endocrinology and Metabolism (2005), 90(1), 359-365  
 CODEN: JCEM42; ISSN: 0021-972X  
**PUBLISHER:** Endocrine Society  
**DOCUMENT TYPE:** Journal  
**LANGUAGE:** English
- AB** To help understand the mechanisms by which weight loss is maintained after Roux-en-Y gastric bypass (RYGBP), we measured circulating concns. of total and bioactive octanoylated ghrelin, peptide YY (PYY), glucose, and insulin in the fasted state and in response to a liquid test meal in three groups of adult women: lean (n = 8); weight-stable 35 ± 5 mo after RYGBP (n = 12; mean body mass index, 33 kg/m<sup>2</sup>); and matched to the surgical group for body mass index and age (n = 12). Fasting plasma total ghrelin levels were nearly identical between RYGBP (425 ± 54 pg/mL) and the matched controls (424 ± 28 pg/mL) and highest in lean controls (564 ± 103 pg/mL). The response to the test meal was comparable between lean and RYGBP groups, with 27% and 20% maximal suppression, resp., whereas the magnitude of suppression was significantly diminished in the matched controls (17%) compared with the lean group. Fasting levels of octanoylated ghrelin were highest in the lean controls, 220 ± 36 pg/mL vs. 143 ± 27 in the RYGBP group (P = 0.05) and 127 ± 12 pg/mL in the matched controls (P < 0.05). The magnitude of maximal post-meal suppression of octanoylated ghrelin was more marked than with total ghrelin, but similar among groups, ranging from 44-47%. In response to the test meal, there was an early exaggerated rise in PYY in the RYGBP group, such that the peak PYY concentration was 163 ± 24 pg/mL compared with 58 ± 17 (P < 0.01) and 77 ± 23 (P < 0.05) in the matched and lean controls, resp.; area under the curve at 90 min was significantly greater compared with both control groups. Leptin and fasting insulin concns. and homeostasis model of assessment insulin resistance indexes were nearly identical between lean and RYGBP subjects and significantly higher in the body mass index-matched controls. In summary, the absence of a compensatory increase in ghrelin concns. that usually occurs with diet-induced weight loss, and the exaggerated postprandial PYY response after RYGBP, may contribute to weight loss and to the ability of an individual to maintain weight loss after this surgical procedure.
- CC** 14-14 (Mammalian Pathological Biochemistry)
- IT** Section cross-reference(s): 2  
 (loss: Roux-en-Y gastric bypass surgery effect on fasting and postprandial plasma ghrelin, peptide YY, and insulin)
- IT** Body weight  
 Appetite
- IT** (satiety: Roux-en-Y gastric bypass surgery effect on fasting and postprandial plasma ghrelin, peptide YY, and insulin)  
 9004-10-8, Insulin, biological studies 106388-42-5, Peptide YY 169494-85-3, Leptin 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, octanoylated  
 RL: BSU (Biological study, unclassified); BIOL (Biological study) (Roux-en-Y gastric bypass surgery effect on fasting and postprandial plasma ghrelin, peptide YY, and insulin)
- REFERENCE COUNT:** 49 THERE ARE 49 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
- L99** ANSWER 46 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
**ACCESSION NUMBER:** 2005:2387 CAPLUS Full-text  
**DOCUMENT NUMBER:** 142:86880  
**TITLE:** Transgenic mice overexpressing des-acyl ghrelin show small phenotype
- AUTHOR(S):** Ariyasu, Hiroyuki; Takaya, Kazuhiko; Iwakura, Hiroshi; Hosoda, Hiroshi; Akamizu, Takashi; Arai, Yuji; Kanagawa, Kenji; Nakao, Kazuo

- CORPORATE SOURCE:** Dep. Med. Clinical Sci., Kyoto Univ. Grad. Sch. Med., Kyoto, 606-8507, Japan  
**SOURCE:** Endocrinology (2005), 146(1), 355-364  
 CODEN: ENDOAO; ISSN: 0013-7227  
**PUBLISHER:** Endocrine Society  
**DOCUMENT TYPE:** Journal  
**LANGUAGE:** English
- AB** Ghrelin, a 28-amino acid acylated peptide, displays strong GH-releasing activity in concert with GHRH. The fatty acid modification of ghrelin is essential for the actions, and des-acyl ghrelin, which lacks the modification, has been assumed to be devoid of biol. effects. Some recent reports, however, indicate that des-acyl ghrelin has effects on cell proliferation and survival. In the present study, the authors generated two lines of transgenic mice bearing the preproghrelin gene under the control of chicken  $\beta$ -actin promoter. Transgenic mice overexpressed des-acyl ghrelin in a wide variety of tissues, and plasma des-acyl ghrelin levels reached 10- and 44-fold of those in control mice. They exhibited lower body wts. and shorter nose-to-anus lengths, compared with control mice. The serum GH levels tended to be lower, and the serum IGF-I levels were significantly lower in both male and female transgenic mice than control mice. The responses of GH to administered GHRH were normal, whereas those to administered ghrelin were reduced, especially in female transgenic mice, compared with control mice. These data suggest that overexpressed des-acyl ghrelin may modulate the GH-IGF-I axis and result in small phenotype in transgenic mice.
- CC** 2-6 (Mammalian Hormones)
- IT** Appetite  
 Blood plasma  
 Body weight  
 Cell proliferation  
 Development, mammalian postnatal  
 Growth, animal  
 Heart  
 Kidney  
 Sex  
 Stomach
- IT** (des-acyl ghrelin effect on growth and GH-IGF axis and other factors in transgenic mice)  
 9002-60-2, ACTH, biological studies 9002-67-9, LH 9002-68-0, FSH 9002-71-5, TSH 9002-72-6, Growth hormone 9004-10-8, Insulin, biological studies 9034-39-3, Somatoliberin 5110-01-1, Somatostatin 67763-96-6, IGF-I 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, des-acyl derivs.  
 RL: BSU (Biological study, unclassified); BIOL (Biological study) (des-acyl ghrelin effect on growth and GH-IGF axis and other factors in transgenic mice)
- REFERENCE COUNT:** 46 THERE ARE 46 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
- L99** ANSWER 47 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN  
**ACCESSION NUMBER:** 2005:1152686 CAPLUS Full-text  
**DOCUMENT NUMBER:** 144:812  
**TITLE:** A Novel Growth Hormone Secretagogue-1a Receptor Antagonist That Blocks Ghrelin-Induced Growth Hormone Secretion but Induces Increased Body Weight Gain
- AUTHOR(S):** Halem, Heather A.; Taylor, John E.; Dong, Jesse Z.; Shen, Yeelana; Datta, Rakesh; Abizaid, Alfonso; Diano, Sabrina; Horvath, Tamas L.; Culler, Michael D. IPSEN Group, Milford, MA, USA  
**CORPORATE SOURCE:** Neuroendocrinology (2005), 81(5), 339-349  
**SOURCE:** CODEN: NUNDAJ; ISSN: 0028-3835

PUBLISHER: S. Karger AG

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Ghrelin, the natural ligand for the growth hormone secretagogue-1a (GHS-1a) receptor, has received a great deal of attention due to its ability to stimulate weight gain and the hope that an antagonist of the GHS-1a receptor could be a treatment for obesity. We have discovered an analog of full-length human ghrelin, BIM-28163, which fully antagonizes GHS-1a by binding to but not activating the receptor. We further demonstrate that BIM-28163 blocks ghrelin activation of the GHS-1a receptor, and inhibits ghrelin-induced GH secretion in vivo. Unexpectedly, however, BIM-28163 acts as an agonist with regard to stimulating weight gain. These results may suggest the presence of an unknown ghrelin receptor that modulates ghrelin actions on weight gain. In keeping with our results on growth hormone (GH) secretion, BIM-28163 acts as an antagonist of ghrelin-induced Fos protein immunoreactivity (Fos-IR) in the medial arcuate nucleus, an area involved in the ghrelin modulation of GH secretion. However, in the dorsal medial hypothalamus (DMH), a region associated with regulation of food intake, both ghrelin and BIM-28163 act as agonists to upregulate Fos-IR. The observation that ghrelin and BIM-28163 have different efficacies in inducing Fos-IR in the DMH, and that concomitant administration of ghrelin and an excess of BIM-28163 results in the same level of Fos-IR as BIM-28163 administered alone may demonstrate that in the DMH both ghrelin and BIM-28163 act via the same receptor. If so, it is unlikely that this receptor is GHS-1a. Collectively, our findings suggest that the action of ghrelin to stimulate increased weight gain may be mediated by a novel receptor other than GHS-1a, and further imply that GHS-1a may not be the appropriate target for anti-obesity strategies.

CC 2-5 (Mammalian Hormones)

IT Body weight

(gain; GHS-1a receptor antagonist blocks ghrelin-induced growth hormone secretion but induces increased body weight gain)

IT 259279-04-8, Human Ghrelin 304853-26-7D, Ghrelin, analog

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL

(Biological study); USES (Uses)

(GHS-1a receptor antagonist blocks ghrelin-induced growth hormone

secretion but induces increased body weight gain)

REFERENCE COUNT: 39

THERE ARE 39 CITED REFERENCES AVAILABLE FOR THIS

RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 48 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2005:305176 CAPLUS FULL-text

DOCUMENT NUMBER: 143:131584

TITLE: Evaluation of blood active ghrelin and adipocytokines

in patients with inflammatory bowel disease and liver

cirrhosis

AUTHOR(S): Oriishi, Tetsuharu; Itou, Minoru; Toyonaga, Atsushi;

Sata, Michio

CORPORATE SOURCE: The Second Department of Internal Medicine, Kurume

University School of Medicine, Japan

SOURCE: Shoka to Kyushu (2005). Volume Date 2004, 27(1), 39-43

CODEN: SHKYEZ; ISSN: 0389-3626

PUBLISHER: Nippon Shoka Kyushu Gakkai

DOCUMENT TYPE: Journal

LANGUAGE: Japanese

AB We evaluated blood active ghrelin, desacyl-ghrelin, leutin and adiponectin in patients with inflammatory bowel disease and liver cirrhosis. Subjects were 12 patients with Crohn's disease (CD), 17 patients with ulcerative colitis (UC), 14 patients with liver cirrhosis (LC), 10 elders, over 80 years old, and 8 healthy controls. We obtained blood sample in fasting morning and measured 16 times in patients with CD, 7 times in active phase and 9 times in inactive

phase, 22 times in patients with UC, 10 times in active phase and 12 times in remission. Blood level of active ghrelin was significantly higher in CD than in controls, significantly lower in LC and in elders than in controls, although blood level of desacyl-ghrelin was not significantly different in any subject group compared with controls. Blood level of leptin was lower in CD than in controls and adiponectin was higher in LC than in controls. Score of BMI in CD and in elders was lower than in controls, and blood level of albumin, total cholesterol and BCAA was lower in LC and in CD than in controls. Changing pattern of blood level of active ghrelin, desacyl-ghrelin, leptin, and adiponectin in each subject group compared with controls was different resp. Nutritional assessment was lower and active ghrelin was higher in active CD than in inactive CD, though no difference was seen between in active UC and in remission UC. These suggesting that mechanism of malnutrition is differ in each subject group resp. and measuring blood active ghrelin is useful for assessment of malnutrition.

CC 15-8 (Immunochemistry)

IT Section cross-reference(s): 14

IT Blood

Cirrhosis

Human

Malnutrition

(evaluation of blood active ghrelin and adipocytokines in patients with inflammatory bowel disease and liver cirrhosis)

IT 57-88-5, Cholesterol, biological studies 169494-85-3, Leptin

304853-26-7, Ghrelin 304853-26-7D, Ghrelin, desacylated

RL: BSU (Biological study, unclassified); BIOL (Biological study)

(evaluation of blood active ghrelin and adipocytokines in patients with

inflammatory bowel disease and liver cirrhosis)

L99 ANSWER 49 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2005:59342 CAPLUS FULL-text

DOCUMENT NUMBER: 142:233444

TITLE: Separate measurement of plasma levels of acylated and

desacyl ghrelin in healthy subjects using a new direct

ELISA assay

AUTHOR(S): Akamizu, Takashi; Shinomiya, Toshiaki; Irako, Taiga;

Fukunaga, Mikihiro; Nakai, Yoshihide; Nakai,

Yoshikatsu; Kangawa, Kenji

CORPORATE SOURCE: Ghrelin Research Project, Department of Experimental

Therapeutics, Translational Research Center, Kyoto

University Hospital, Faculty of Medicine, Kyoto

University, Kyoto, 606-8507, Japan

SOURCE: Journal of Clinical Endocrinology and Metabolism

(2005), 90(1), 6-9

CODEN: JCEMAZ; ISSN: 0021-972X

PUBLISHER: Endocrine Society

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Two forms of ghrelin, acylated and desacyl, circulate in plasma. Although acylation is thought to be essential for ghrelin biol. activities, recent studies have suggested that desacyl ghrelin may also possess biol. activity. A new com. ELISA system has now enabled us to measure plasma levels of each of these two ghrelin forms sep. This assay system directly measures levels using small amts. of plasma. To evaluate the utility of this assay system, we

measured the plasma levels of the two forms of ghrelin in healthy volunteers. Although acylated ghrelin levels were equivalent to those measured previously by RIA, desacyl ghrelin levels were lower than those expected from the total ghrelin levels previously determined by RIA. The ratios of acylated to desacyl ghrelin significantly correlated with previously determined acylated, but not desacyl, ghrelin levels. After BMI adjustment, the levels of

acylated, but not desacyl, ghrelin plasma levels were higher in female subjects than those in males. Several metabolic and hormonal parameters significantly correlated with either plasma acylated or desacyl ghrelin levels. These findings indicate that sep. measurements of the two ghrelin form levels may provide valuable information on their structure, gender differences, and physiol. implications.

CC 2-1 (Mammalian Hormones)

IT Blood analysis

Body weight

Human

(sep. measurement of plasma levels of acylated and desacyl ghrelin in healthy subjects using a new direct ELISA assay and correlation with hormonal and metabolic parameters)

IT 304853-26-7, Ghrelin 304853-26-7D, Ghrelin, desacyl

RL: ANT (Analyte); ANST (Analytical study)

(sep. measurement of plasma levels of acylated and desacyl ghrelin in healthy subjects using a new direct ELISA assay and correlation with hormonal and metabolic parameters)

REFERENCE COUNT: 26 THERE ARE 26 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 50 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2003:491064 CAPLUS Full-text

DOCUMENT NUMBER: 139:47174

TITLE: Pharmaceutical compositions comprising unacylated

ghrelin and pharmaceutical uses for metabolic disorders

INVENTOR(S): Chigo, Ezio; Van der Lely, Aart Jan

PATENT ASSIGNEE(S): Thecatechnologies Inc., Can.

SOURCE: PCT Int. Appl., 26 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003051389	A2	20030626	WO 2002-CA1964	20021218
WO 2003051389	A3	20030912		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, MZ, NA, NI, NL, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GW, GN, GQ, MW, ML, MR, NE, SN, TD, TG				
CA 2470235	A1	20030626	CA 2002-2470235	20021218
AU 2002351593	A1	20030630	AU 2002-351593	20021218
EP 1455814	A2	20040915	EP 2002-787266	20021218
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, SK				
US 2005080007	A1	20050414	US 2003-499376	20021218
JP 2005311771	T	20050428	JP 2003-552322	20021218
PRIORITY APPL. INFO.:			CA 2001-2365704	A 20011218
			WO 2002-CA1964	W 20021218

AB The present invention relates to compns. containing unacylated ghrelin and derivs. thereof and their uses in the control of glycemia in ageing patients, GH deficient patients, diabetic patients and obese patients.

IC ICM A61K038-22

ICS A61P003-04; A61P003-10

CC 1-10 (Pharmacology)

Section cross-reference(s): 63

IT Body weight

(controlling of; pharmaceutical compns. comprising unacylated ghrelin and therapeutical uses for metabolic disorders)

IT 304853-26-7D, Ghrelin, deacylation products

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL

(Biological study); USES (Uses)

(pharmaceutical compns. comprising unacylated ghrelin and therapeutical uses for metabolic disorders)

L99 ANSWER 51 OF 66 CAPLUS COPYRIGHT 2007 ACS on STN

ACCESSION NUMBER: 2001:581723 CAPLUS Full-text

DOCUMENT NUMBER: 135:147451

TITLE: Use of compounds for the regulation of food intake

INVENTOR(S): Andersen, Maibritt Banskholm; Hansen, Birgit Sehested;

Raun, Kirsten; Tullin, Soren; Thim, Lars

PATENT ASSIGNEE(S): Novo Nordisk A/S, Den.

SOURCE: PCT Int. Appl., 23 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001056592	A1	20010809	WO 2001-DK64	20010129
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MY, MZ, NA, NI, NL, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
PRIORITY APPL. INFO.:			DK 2000-161	A 20000201
			DK 2000-1107	A 20000717
AB Compds. that are ligands for the receptor GHS-R 1A, as well as pharmaceutically acceptable salts thereof, are useful for the manufacture of medicaments for the regulation of food intake.				
IC ICM A61K038-17				
ICS A61K031-7076; A61P003-04				
CC 1-11 (Pharmacology)				
Section cross-reference(s): 2				
ST appetite regulation growth hormone secretagogue receptor ligand				
IT AIDS (disease)				
(body wasting in, treatment of; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)				
IT Body weight				
(regulation of; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)				

IT Antidiabetic agents  
Antibesity agents  
Appetite  
Appetite depressants  
Drug delivery systems  
Drug screening  
Feeding  
(use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)

IT Disease, animal  
(wasting, in AIDS, treatment of; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)

IT 9002-72-6, Somatotropin  
RL: ADV (Adverse effect, including toxicity); BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process)  
(deficiency and secretion of, stimulation of appetite in relation to; use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)

IT 58-61-7, Adenosine, biological studies 193079-69-5, NN703 267225-30-9, hmo10g 353289-93-9  
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(use of compds. for regulation of food intake that are ligands of growth hormone secretagogue type 1A receptors (GHS-R 1A) in relation to growth hormone release)

REFERENCE COUNT: 3 THERE ARE 3 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L99 ANSWER 52 OF 66 WPX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: 2007-476486 [46] WPX  
DOC. NO. CPI: C2007-173901 [46]  
DOC. NO. NON-CPI: N2007-362182 [46]  
TITLE: New ghrelin peptidyl analogs useful for e. g. stimulating growth hormone secretion, treating growth hormone deficient state, increasing muscle mass and bone density, treating sexual dysfunction  
B04, S03  
DERWENT CLASS: COMSTOCK J M; CULLER M D; DONG Z X; SHEN Y  
INVENTOR: (SCRC-C) SAS SOC CONSEILS RECH & APPL SCI; (COMS-I)  
PATENT ASSIGNEE: COMSTOCK J M; (CULL-I) CULLER M D; (DONG-I) DONG Z X; (SHEN-I) SHEN Y  
COUNTRY COUNT: 115  
PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG MAIN IPC  
WO 2007038678 A2 20070405 (200746)\* EN 110[0]

APPLICATION DETAILS:

PATENT NO KIND APPLICATION DATE  
WO 2007038678 A2 WO 2006-US37889 20060927

PRIORITY APPL. INFO: US 2005-750771P 20051215  
US 2005-721557P 20050928  
US 2005-748904P 20051209

INT. PATENT CLASSIF.: A61K0038-22 [I,A]; A61K0038-22 [I,C]

BASIC ABSTRACT:

WO 2007038678 A2 UPAB: 20070719  
NOVELTY - Ghrelin peptidyl analogs, or their salts are new.  
DETAILED DESCRIPTION - Ghrelin peptidyl analogs of formula (R2R3)-Al-A2-A3-A4-A5-A6-A7-A8-A9-A10-A11-A12-A13-A14-A15-A16- A17-A18-A19-A20-A21-A22-A23-A24-A25-A26-A27-A28-RI, or their salts are new.

Al=e.g. Gly or Alb;  
A2=e.g. Ser, Alb, Ava;  
A3=e.g. Asp(NH-hexyl), Asp(1-heptanol), Cys(S-(CH2)9CH3), Glu(NH-hexyl) or Glu(1-heptanol);  
A4=e.g. Phe;  
A5=e.g. Leu;  
A6=e.g. Ser;  
A7=e.g. Pro, Dhp (3,4-dehydropyrrolidine), 4-Hyp (4-hydroxyproline), Pip (pipercolic acid), Thz (thiazolidine-4-carboxylic acid) or Tic (1,2,3,4-tetrahydroisquinoline-3-carboxylic acid); A8=e.g. Glu or Alb;  
A9=e.g. His, 3-Pal (beta-(3-pyridinyl)alanine), 4-Pal (beta-(4-pyridinyl)alanine), Taz (beta-(4-thiazolyl)alanine) or 2-Thi (beta-(2-thienyl)alanine);  
A10=e.g. Gln or Alb;  
A11=e.g. Arg;  
A12=e.g. Val;  
A13 and A14=e.g. Gln;  
A15=e.g. Arg, Glu(NH-hexyl) or Ser(n-octanoyl); A16=e.g. Lys, Glu(NH-hexyl) or Ser(n-octanoyl); A17=e.g. Glu, Lys(biotinyl), Asp(NH-hexyl), Asp(1-heptanol), Cys(S-(CH2)9CH3), Dap(octanesulfonyl), Glu(NH-hexyl), Glu(1-heptanol) or Ser(n-octanoyl);  
A18=e.g. Ser, Glu(NH-hexyl) or Ser(n-octanoyl); A19 and A20=e.g. Lys, Glu(NH-hexyl) or Ser(n-octanoyl); A21, A22 and A27=e.g. Pro;

R2 and R3=e.g. H, 1-6C acyl, n-butyl, isobutyl or n-octanoyl. Full Definitions are given in the DEFINITIONS (Full Definitions) Section. An INDEPENDENT CLAIM is included for screening for a compound able to bind to a GHS (growth hormone secretagogue) receptor involving measuring the ability of a compound to affect binding of (I) to the receptor, to a fragment of the receptor, to a polypeptide comprising the fragment of the receptor, or to a derivative of the polypeptide. ACTIVITY - Endocrine-Gen.; Muscular-Gen.; Osteopathic; Anorectic; Gastrointestinal-Gen.; Respiratory-Gen.; Antidiabetic; Ophthalmological; Cardiovascular-Gen.; Antiinflammatory; Antiasthmatic; Antiarthritic; Hepatotropic; Immunosuppressive; Neuroprotective; Nootropic; Dermatological; Antirheumatic; Vasotropic; Antiallergic; Antipsoriatic; Anticancer; Anabolic; Hypertensive; Antithyroid.  
MECHANISM OF ACTION - Ghrelin modulator; Growth hormone (GH) secretagogue receptor modulator. The GHS-R (growth hormone secretagogue receptor) binding activity of (Lys(biotinyl)17)ghrelin(1 - 28)-NH2 (1A) was tested as follows. Membranes for radioligand binding studies were prepared by homogenization of

CHO-K1 cells expressing the human recombinant GHS receptor. The homogenates were washed twice by centrifugation (39000 g/10 minutes) and the final pellets were resuspended in 50 mM Tris-HCl containing 2.5 mM MgCl<sub>2</sub> and 0.1% bovine serum albumin (BSA). For the selected assay, aliquots of approximately 0.4 ml were incubated with 0.05 nM (125I)ghrelin (2000 Ci/mmol) with and without 0.05 ml of unlabeled competing test peptide. After approximately 60 minutes at 4 degrees C, the bound (125I)ghrelin was separated from the free ghrelin by rapid filtration which were pre-soaked in 0.5% polyethylenimine/0.1% BSA. The filters were then washed 3 times with 5-ml aliquots of ice-cold 50 mM Tris-HCl and 0.1% BSA. (IA) Showed a K<sub>i</sub> value of 0.07 nM.

USE - For stimulating growth hormone secretion in a subject; for treating growth hormone deficient state, for increasing muscle mass and bone density, for treating sexual dysfunction in males or females, for facilitating a weight gain, for facilitating maintenance of weight, physical functioning, recovery of physical function and/or appetite increase; for treating weight loss associated with the onset of cachexia (where the cachexia is incidental to the subject suffering from anorexia, bulimia, cancer, AIDS or chronic obstructive pulmonary disease), weight loss due to the onset of wasting syndrome, particularly in the frail or elderly, onset of Alzheimer's diseases, due to chemotherapy, radiation therapy, temporary immobilization, permanent immobilization and dialysis; for treating or preventing post-operative ileus or chronic obstructive pulmonary diseases; for treating disease caused by excessive growth hormone secretion (where the excessive weight gain is a contributing factor of diseases e.g. hypertension, dyslipidemia, gall stones, osteoarthritis and cancers, Prader-Willi syndrome), for facilitation of loss of excessive body weight, for facilitation of appetite decrease and weight maintenance, for treating obesity, diabetes, complications of diabetes including retinopathy, and/or cardiovascular disorders; for treating inflammation in a subject; for treating inflammation associated with infectious process such as viral infection e.g. hepatitis A virus, human immunodeficiency virus; bacterial infection e.g. Staphylococcus aureus; parasitic infection, fungal infection; inflammation associated with liver toxicity (where the liver toxicity is associated with cancer therapy e.g. apoptosis induction and/or chemotherapy), transplant rejection, burn, lung inflammation, and cancer; for treating loss of appetite caused by inflammation (low grade inflammation caused by aging); for treating inflammatory diseases (e.g. asthma, reactive arthritis, hepatitis, spondylarthritis, Sjogren's syndrome, Alzheimer's disease and atopic dermatitis), autoimmune disease (e.g. systemic lupus erythematosus, rheumatoid arthritis, systemic vasculitis, insulin dependent diabetes mellitus, multiple sclerosis, muscular dystrophy, experimental allergic encephalomyelitis, psoriasis, Crohn's disease, inflammatory bowel disease, ulcerative colitis, Addison's disease, alopecia areata, celiac disease, thyroid disease, scleroderma) (claimed).

ADVANTAGE - The peptidyl analogs possess agonist or antagonist ghrelin activity, and it exhibits higher cell membrane binding affinity and is found to interact more efficiently with membrane bound receptors and thus are more biologically potent compared to native ghrelin. It achieves a beneficial affect in a subject by helping to cure or reduce the severity or reduces the likelihood of onset or severity a disease or disorder. It stimulates or suppresses growth hormone secretion in a subject.

MANUAL CODE: CFI: B04-J01; B11-C08E; B12-K04E1; B14-C03; B14-C09; B14-D01; B14-E08; B14-E10C; B14-E11; B14-E12; B14-F01; B14-F02; B14-G02; B14-H01; B14-J01A4; B14-J05; B14-K01; B14-N01; B14-N03; B14-N11; B14-N12; B14-N17; B14-P04; B14-R02; B14-S01; B14-S04; B14-S16 EPI: S03-E04E; S03-E14A1

TECH ORGANIC CHEMISTRY - Preparation (disclosed): No general methods for the preparation of ghrelin peptidyl analogs (I) are given.

L99 ANSWER 53 OF 66 WPX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: 2007-283319 [27] WPX  
DOC. NO. CPI: C2007-103794 [27]

TITLE: New peptide or peptidomimetic compounds, useful for treating diseases such as anorexia, arthritis, inflammatory bowel disease, ulcerative colitis, obesity, hyperinflation, diabetes, and AIDS

DERIVAT CLASS: B02: B04

INVENTOR: DONG Z X; EYNON J S; SHEN Y

PATENT ASSIGNEE: (SCRC-C) SAS SOC CONSEILS RECH & APPL SCI: (DONG-I) DONG

COUNTRY COUNT: Z X; (EYNO-I) EYNON J S; (SHEN-I) SHEN Y

113

PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG	MAIN IPC
WO 2007014258	A2	20070201	(200727)	EN	171	[0]

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2007014258	A2	WO 2006-US29002	20060724

PRIORITY APPL. INFO: US 2005-701729P

INT. PATENT CLASSIF.: C07K0014-435 [I,C]; C07K0014-60 [I,A]; C12P0021-06 [I,A];

C12P0021-06 [I,C]

BASIC ABSTRACT:

WO 2007014258 A2 UPAB: 20070426

NOVELTY - Peptide or peptidomimetic compounds (I) or (II) and their salts are new.

DETAILED DESCRIPTION - Peptide or peptidomimetic compounds of formula (I) or (II), and their salts are new. X= a group of formula (Xa), (Xb), or (Xc); Y=H or NR12N13; Z=C(O)- or -SO2-; n=1-8;

R1, R3=H or 1-4C alkyl;

R2, R4=indene or naphthalene-containing radical; R5=H, optionally substituted (1-6C alkyl, 2-6C alkenyl, or 2-6C alkynyl), aryl, alkylaryl, alkylarylalkyl, or arylalkylaryl; R6, R9=optionally substituted 1-6C alkyl; R6, R7, R10-R13=H, or optionally substituted 1-6C alkyl. Provided that R2 and R4 are not radical of formula (Xd), where Q is H or 1-4C alkyl.

INDEPENDENT CLAIMS are also included for the following: (1) determining an ability of the compound to bind to growth hormone secretagogues (GHS), comprising measuring the ability of the compound to effect binding with receptor, fragment of receptor, polypeptide of the receptor fragment, or derivative of the polypeptide; (2) screening for a ghrelin agonist, comprising using the inventive compound or its salt in a competition experiment with test compounds;

(3) screening for a ghrelin antagonist, comprising using the inventive compound or its salt to produce GHS receptor activity and then measuring the ability of a test compound to alter GHS receptor activity; (4) achieving a beneficial effect in a subject, comprising administering to the subject the inventive compound or its salt to a patient;

(5) stimulating growth hormone secretion in a subject, comprising administering to a subject a ghrelin agonist or its salt in an amount effective to produce a detectable increase in growth hormone secretion; (6) suppressing growth hormone secretion in a subject, comprising administering to

a subject a ghrelin antagonist of formula (I) or (II) or its salt in an amount that is sufficient to produce a detectable decrease in growth hormone secretion:

(7) eliciting a ghrelin agonist or antagonist effect in a subject, comprising administering to a subject a ghrelin agonist or antagonist of formula (I) or (II) or its salt in an amount sufficient to produce a detectable decrease in growth hormone secretion; and (8) promoting gastrointestinal motility in a subject, comprising administering to a subject a ghrelin antagonist of formula (I) or (II) or its salt in an amount that is sufficient to facilitate gastrointestinal motility.

**ACTIVITY** - Anabolic; Eating-Disorders-Gen; Cytostatic; Anti-HIV; Anabolic; Cardiovascular-Gen; Osteopathic; Antiarthritic; Antiinflammatory; Dermatological; Immunosuppressive; Gastrointestinal-Gen; Antitumor; Anorectic; Hypotensive; Antidiabetic; Antilipemic.

**MECHANISM OF ACTION** - Ghrelin agonist; Ghrelin antagonist. Growth hormone release stimulator; Growth hormone release stimulator. (I) and (II) were tested for their ability to stimulate release of growth hormone. The compound was injected subcutaneously in 10-day old rats at a dose of 300 mg/kg. After 15 minutes, the growth hormone levels were measured and compared to growth hormone levels in rats injected with solvent control. No results are given.

**USE** - As ghrelin agonists for stimulating growth hormone secretion in a subject having disease or disorder accompanied by weight loss. As ghrelin antagonists for suppressing growth hormone in a subject having disease or condition characterized by excessive weight. For promoting gastrointestinal motility in a subject suffering from post-operative gastroparesis (which is incidental to the onset of diabetes or is brought about by chronic diabetic state). Also in screening for a ghrelin agonist or antagonist. The diseases or disorders accompanied by weight loss include anorexia, bulimia, cancer cachexia, AIDS, AIDS wasting, cachexia, cardiovascular disease, osteoporosis, arthritis, systemic lupus erythematosus, inflammatory bowel disease, Crohn's Disease, ulcerative colitis, chronic renal failure, or wasting in frail elderly. The excessive weight is especially a contributing factor to a disease or condition including obesity, hypertension, diabetes, dyslipidemia, cardiovascular disease, gall stones, osteoarthritis, Prader-Willi Syndrome and cancer (all claimed). As functional ghrelin analogs both as research tool and/or as therapeutic agents. Also useful in e.g. screening for compounds active at the GHS receptor, for determining the presence of GHS receptor in a sample, or in preparing and examining the role or effect of ghrelin.

**ADVANTAGE** - The inventive compound is active at GS receptor. It is capable of binding to the receptor and **MANUAL CODE:** CFI: B06-B01; B06-D01; B07-D05; B10-A08; B10-A09B;

B10-B01B; B10-B02F; B11-C08E2; B12-K04E; B12-K04E1;  
B14-A02B1; B14-C09; B14-D02A2; B14-E08; B14-E10; B14-E11;  
B14-E12; B14-F01; B14-F02; B14-F06A; B14-G01B; B14-G02D;  
B14-H01; B14-J05; B14-L01; B14-L06; B14-N01A; B14-N10;  
B14-N12; B14-N17; B14-S04; B14-S16; B14-S20A

#### TECH

**ORGANIC CHEMISTRY** - Preparation: (I) and (II) are prepared by treating an intermediate containing indole and tert-butyl oxycarbonyl with a solution containing trifluoroacetic acid, evaporating the solution, triturating by adding cold ether to the residue and collecting the precipitate, and purifying the formed crude product.

**Preferred Method:** The stimulation of growth hormone secretion is indicated for treatment of a growth hormone deficient state, for increasing muscle mass, for increasing bone density, for sexual dysfunction in males or females, for facilitating a weight gain, for facilitating maintenance of weight for facilitating maintenance of physical functioning, for facilitating recovery of physical function, and/or facilitating appetite increase. The treatment for growth hormone deficient state includes chemotherapy, radiation therapy, temporary or permanent immobilization,

and dialysis. The suppression of growth hormone secretion is indicated for the treatment of disease or condition characterized by excessive growth hormone secretion, for facilitation of weight loss, for facilitation of appetite decrease, for facilitation of weight maintenance, for treating obesity, for treating diabetes, for treating complications of diabetes including retinopathy, and/or for treating cardiovascular disorders.

L99 ANSWER 54 OF 66 WPIX COPYRIGHT 2007 THE THOMSON CORP on STN  
ACCESSION NUMBER: 2005-100672 [11] WPIX  
DOC. NO. CPI: C2005-033673 [11]  
TITLE: New tetraline derivatives useful for the treatment of disorders regulated by ghrelin e.g. anorexia, cancer cachexia, eating disorders, age-related decline in body composition, weight gain, obesity and diabetes mellitus

**DERWENT CLASS:** B03; B05

**INVENTOR:** LIU B; LIU G; NELSON L T J; PATEL J R; SHAM H L; XIN Z; ZHAO H

**PATENT ASSIGNEE:** (LIUB-I) LIU B; (LIUG-I) LIU G; (NELS-I) NELSON L T J; (PATE-I) PATEL J R; (SHAM-I) SHAM H L; (XIN2-I) XIN Z; (ZHAO-I) ZHAO H; (ABBO-C) ABBOTT LAB

**COUNTRY COUNT:** 1

**PATENT INFORMATION:**

PATENT NO	KIND	DATE	WEEK	LA	PG	MAIN IPC
US 20050014794	A1	20050120	(200511)*	EN	35	[0]
US 7115767	B2	20061003	(200665)	EN		

**APPLICATION DETAILS:**

PATENT NO	KIND	APPLICATION	DATE
US 20050014794	A1	Provisional	US 2003-488250P 20030718
US 20050014794	A1		US 2004-893484 20040716

**PRIORITY APPLN. INFO:** US 2004-893484 20040716

US 2003-488250P 20030718

**INT. PATENT CLASSIF.:**

IPC ORIGINAL: A61K0031-21 [I,C]; A61K0031-27 [I,A]; C07C0271-00 [I,C]; C07C0271-06 [I,A]

**IPC RECLASSIF.:**

(I,C); A61K0031-165 [I,A]; A61K0031-165 [I,C]; A61K0031-185 [I,C]; A61K0031-195 [I,A]; A61K0031-275 [I,C]; A61K0031-277 [I,A]; A61K0031-401 [I,A]; A61K0031-401 [I,C]; A61K0031-445 [I,A]; A61K0031-445 [I,C]; C07D0211-00 [I,C]; C07D0211-06 [I,A]

**BASIC ABSTRACT:**

US 20050014794 A1 UPAB: 20050708

**NOVELTY** - Tetraline derivatives (I-II) are new.

**DETAILED DESCRIPTION** - Tetraline derivatives of formula (I-II) and their salts and derivatives are new. R1,R2 = H, alkyl, aryl, arylalkyl, cycloalkyl, cycloalkylalkyl, cycloalkenyl, cycloalkenylalkyl, heterocycle or heterocyclealkyl; N(R1+R2) = heterocycle;

R3-R6 = H, alkoxyl, alkoxyalkyl, alkyl, alkenyl, alkenylalkoxy, aryl, cyano, cycloalkyl, (halo)alkyl, heterocycle, (hydroxy)alkyl, nitro, sulfonyl, RaRbN-, RaRbN-alkyl, RaRbN-carboxyalkyl, RaRbN-carboxyalkenyl or RaRbN-sulfonyl; R7 = H, alkenyl, alkyl, (alkoxy)carbonyl, aryl, hydroxy, haloalkyl, cycloalkyl, heterocycle, RCRdN-, RCRdN-carboxy or RCRdN-sulfonyl;

R8-R13 = H, (alkoxy)alkyl, alkyl, (alkenyl)alkoxy, aryl, cyano, (halo)alkyl, heterocycle, (hydroxy)alkyl,  $\text{RarBn}^-$ ,  $\text{RarBn}$ -alkyl or  $\text{RarBn}$ -carboxyalkyl;  
R14 = undefined;

[illegible]

R<sub>C</sub>, R<sub>D</sub> = H, alkenyloxycarbonyl, alkoxycarbonyl, alkyl-, alkylcarbamoyl-, alkylalkenylalkoxy-carbonyl, alkoxycarbonyl, alkynoxycarbonyl, (aryl)alkyl-, haloalkoxy-carbonyl, alkylsulfonyl, alkynyloxycarbonyl, cycloalkyl-, arylalkoxy-carbonyl, aryloxyalkyl-, cycloalkylalkoxy-carbonyl, heterocycle-, heterocyclusubstituted-, heterocycloalkyl-, heterocycloalkoxy-carbonyl, heterocycloalkyl-, heterocycloalkoxy-carbonyl, heterocycloalkoxy-, heterocycloalkoxy-carbonyl, haloalkoxy-carbonyl, nitroalkoxy-carbonyl, RefN-alkoxy-carbonyl, RefN-carbonylethyl-, RefN-alkyl- or RefN-alkoxy-carbonyl; Re, Rf = alkyl- or aryl-.

ACTIVITY - Anabolic; Cytostatic; Immunomodulator; Eating Disorders Gen.;

Anorectic; Antidiabetic.  
MECHANISM OF ACTION - Ghrelin receptor modulators. Test details are described but no results for specific compounds are given. In general the teraline compounds show an IC50 value of 0.001 - 0.2 microm.

USE - In the preparation of a composition useful for the treatment of anorexia, eating disorders, age-related decline in body composition, weight gain, obesity and diabetes mellitus (Claimed).

**ADVANTAGE** - The tetraline derivatives modulate ghrelin receptors.

CODE: CPI: B06-H; B07-H; B10-B02B; B14-E11A; B14-E11B

; B14-E12; B14-S04A

**ORGANIC CHEMISTRY** - Preparation: The tetraline derivative (I) (in which R7 is  $\text{NH}-\text{C}(\text{O})-\text{O}-\text{CH}_2-\text{C}(\text{CH}_3)_2$ ) is prepared by treating a compound of formula (ii) with sodium iodide and methyl iodide in dimethylformamide to form a compound of formula (iii), treating (iii) with lithium diisopropylamine in tetrahydrofuran followed by treatment with di-*tert*-butyl dicarbonate to form a compound of formula (iii'), hydrolyzing (iii') with lithium hydroxide, sodium hydroxide in aqueous methanol to form (iv), treating (iv) with diphenoxyposphonium acid and triethyl amine in a mixture of tetrahydrofuran and iso-butyl alcohol under heated conditions to form a compound of formula (iv'), treating (v) with 4 N hydrochloric acid in dioxane or trifluoroacetic acid in dichloromethane to form a compound of formula (vi) and reacting (vi) with an amine of formula  $\text{R}_1\text{R}_2\text{NH}$  in the presence of (benzotriazol-1-yl-oxo)-dimethylamino-methylene)-dimethylammonium tetrafluoroborate (TBTU) and triethylamine in dimethylformamide.

199 ANSWER 55 OF 66 WPIX COPYRIGHT 2007 THE THOMSON CORP on STN  
 ACCESSION NUMBER: 2002-195531 [25] WPIX  
 DOC. NO. CPI: C2002-060339 [25]

Truncated ghrelin analogs active at growth-hormone secretagogue receptor useful for diagnosing or treating diseases such as anorexia, bulimia, cancer, obesity, diabetes mellitus, hypertension, osteoarthritis

DERIVENT CLASS: B04; D16  
INVENTOR: BEDNAREK M; BEDNAREK M A  
PATENT ASSIGNEE: (BEDN-1) BEDNAREK M A; (MERI-C) MERCK & CO INC  
COUNTRY COUNT: 23

**PATENT INFORMATION:**

93

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2001092292	A2	WO 2001-US17026	20010525
US 6967237	B2 Provisional	US 2000-207920	20000530
EP 1353683	A2	EP 2001-939465	20010525
US 20030186844	A1	WO 2001-US17026	20010525
EP 1353683	A2	WO 2001-US17026	20010525
JP 2004514651	W	WO 2001-US17026	20010525
US 6967237	B2	WO 2001-US17026	20010525
JP 2004514651	W	JP 2002-500904	20010525
US 20030186844	A1	US 2002-276392	20021115
US 6967237	B2	US 2002-276392	20021115

**FILING DETAILS:**

PATENT NO	KIND	PATENT NO
EP 1353683 A2	Based on	WO 2001092292 A
JP 2004514651 W	Based on	WO 2001092292 A
US 6967237 B2	Based on	WO 2001092292 A

PRIORITY APPLN. INFO: US 2000-207920P 20000530  
US 2002-276392 20021115

INT. PATENT CLASSIF.:

MAIN: C07K005-08

IPC RECLASSIF.: A61K0038-00

A61K0038-2

A61P0043-01

A61P0005-0

C07K0014-6

C07K0005-10

C07K0007-0

**BASIC ABSTRACT:**

WO 2001092292 A2 UPAB: 20060202

[illegible]

the binding of (I) to either the receptor, a fragment of the receptor comprising ghrelin binding site, a polypeptide comprising the fragment or derivative of the polypeptide, where the ability of the analog to bind the receptor is measured. (I) is also useful for achieving a beneficial effect in a subject; and for stimulating growth hormone secretion (claimed). (I) is useful as a research tool which include determining the presence of GHS receptor in a sample or preparation, and examining the role of effect of ghrelin. (I) is further useful for screening both agonist and antagonist of ghrelin, which are used therapeutically, where ghrelin agonist is utilized for treating a growth hormone deficient state, increasing muscle mass and bone density, treating sexual dysfunction in males or females, facilitating a weight gain, maintenance of weight, maintenance of physical functioning, recovery of physical function, and/or appetite increase, where a weight gain, maintenance in weight, or appetite increase is particularly useful for a patient having a disease or disorder, or under going a treatment, accompanied by weight loss such as anorexia, bulimia, cancer cachexia, acquired immunodeficiency syndrome (AIDS), wasting, cachexia, and wasting in frail elderly, and examples of treatments accompanied by weight loss include chemotherapy, radiation therapy, temporary or permanent immobilization, and dialysis; and ghrelin antagonist is utilized to facilitate weight loss, appetite decrease, weight maintenance, treat obesity, diabetes, and complications of diabetes including retinopathy, and/or cardiovascular disorders, where excessive weight is a contributing factor to different diseases including hypertension, diabetes, dyslipidemias, cardiovascular disease, gall stones, osteoarthritis and certain forms of cancers, and bringing about a weight loss can be used, for e.g. to reduce the likelihood of such diseases and for treating such diseases.

**ADVANTAGE** - (I) induces growth hormone release from primary-culture pituitary cells in a dose-dependent manner without stimulating the release of other pituitary hormones. Unlike longer length ghrelin, (I) can be synthesized easily and has increased solubility in physiological buffers.

**MANUAL CODE:** CFI: B04-C01; B04-C01F; B14-A02; B14-A02B1; B14-C09;

B14-E12; B14-F01; B14-F02; B14-F06; B14-G03; B14-H01;

B14-I06; B14-N01; B14-N03; B14-N12; B14-S04; D05-C12;

D05-H17A5; D05-H18

#### TECH

**BIOTECHNOLOGY** - Preparation: (I) is prepared by standard biochemical synthesis involving introduction of nucleic acid into a cell and expression of the nucleic acids. Preferred Analog: In structure (A) or (B), X has a structure (C); where X1 = -O-, -S-, -OC(O)-, -NHC(O)-, or -CH2-; and R = -C(4-20) alkyl, -C(4-20) substituted alkyl, -C(4-20) substituted alkenyl, -C(4-20) alkenyl, -C(4-20) heteroalkyl, -C(4-20) substituted heteroalkyl, aryl, or alkylaryl. Preferably the structure of (I) is (A), where N = 0-11 preferably 0-6 or 0-3 and more preferably 0, and X1 = -C(O)- or -NH(O)-, and R = -C(5-15) alkyl more preferably -(CH2)6CH3, where Z1 (if present) = -C(O)CH3 and Z2 (if present) = -NH2. **ORGANIC CHEMISTRY** - Preparation: (I) is synthesized by standard chemical synthesis e.g. Vincent in Peptide and Protein Drug Delivery, New York, N.Y., Dekker, 1990.

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ACCESSION NUMBER: 2007059803 EMBASE Full-text

TITLE: Cancer cachexia: It's time for more clinical trials.

AUTHOR: Bossola M.; Pacelli F.; Tortorelli A.; Doglietto G.B.

CORPORATE SOURCE: M. Bossola, Istituto di Clinica Chirurgica, Università

Cattolica del Sacro Cuore, Largo A. Gemelli, 8, 00168,

**SOURCE:** Roma, Italy. maubosso@tin.it  
Annals of Surgical Oncology, (2007) Vol. 14, No. 2, pp.  
276-285.

Refs: 84

ISSN: 1068-9265 E-ISSN: 1534-4681 CODEN: ASOJF4

COUNTRY: United States

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 016 Cancer

037 Drug Literature Index

038 Adverse Reactions Titles

005 General Pathology and Pathological Anatomy

009 Surgery

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 16 Feb 2007

ABSTRACT: Last Updated on STN: 16 Feb 2007

Cancer cachexia (CC) is a multifactorial paraneoplastic syndrome characterized by anorexia, body weight loss, loss of adipose tissue and skeletal muscle, accounting for at least 20% of deaths in neoplastic patients. CC significantly impairs quality of life and response to anti-neoplastic therapies, increasing morbidity and mortality of cancer patients. Muscle wasting is the most important phenotypic feature of CC and the principal cause of function impairment, fatigue and respiratory complications, mainly related to a hyperactivation of muscle proteolytic pathways. Most current therapeutic strategies to counteract CC have proven to be only partially effective. In the last decade, the correction of anorexia, the inhibition of catabolic processes and the stimulation of anabolic pathways in muscle have been attempted pharmacologically with encouraging results in animal models and through preliminary clinical trials. However, data in the clinical setting are still scanty and non definitive. It is time to start prospective, randomized, controlled trials to evaluate which drugs are effective in counteracting the loss of lean of muscle mass and in improving nutritional status and quality of life in patients affected by cancer-related cachexia. .COPYRG. 2006 Society of Surgical Oncology.

#### CONTROLLED TERM:

#### Medical Descriptors:

adipose tissue  
adrenal insufficiency: SI, side effect  
alopecia: SI, side effect  
anorexia: DT, drug therapy  
article  
biosynthesis  
blood pressure  
\*cachexia: DM, disease management  
\*cachexia: DT, drug therapy  
\*cachexia: ET, etiology  
\*cancer cachexia: DM, disease management  
\*cancer cachexia: DT, drug therapy  
\*cancer cachexia: ET, etiology  
cancer patient  
cancer: DT, drug therapy  
catabolism  
clinical trial  
combination chemotherapy  
coordination disorder: SI, side effect  
drowsiness: SI, side effect  
drug effect  
drug mechanism  
drug safety  
energy expenditure



energy metabolism  
 enteric feeding  
 experimental model  
 fatigue  
 fluid retention  
 functional disease  
 human  
 hyperglycemia: SI, side effect  
 impotence: SI, side effect  
 lung non small cell cancer: DT, drug therapy  
 monotherapy  
 muscle atrophy  
 nonhuman  
 nutritional status  
 \*paraneoplastic syndrome: DM, disease management  
 \*paraneoplastic syndrome: DT, drug therapy  
 \*paraneoplastic syndrome: ET, etiology  
 parenteral nutrition  
 peripheral edema: SI, side effect  
 phenotype  
 physical activity  
 protein degradation  
 pulse pressure  
 quality of life  
 respiratory tract disease  
 side effect: SI, side effect  
 skeletal muscle  
 thinking impairment: SI, side effect  
 thromboembolism: SI, side effect  
 vomiting: SI, side effect  
 weight reduction  
 Drug Descriptors:  
 cannabis derivative: PD, pharmacology  
 cyclooxygenase 2 inhibitor: PD, pharmacology  
 cytokine antibody: DT, drug therapy  
 cytokine antibody: PD, pharmacology  
 cytokine  
 dipeptidyl carboxypeptidase inhibitor: DT, drug therapy  
 dipeptidyl carboxypeptidase inhibitor: PD, pharmacology  
 docetaxel: CB, drug combination  
 docetaxel: DT, drug therapy  
 dronabinol: AE, adverse drug reaction  
 dronabinol: CT, clinical trial  
 dronabinol: CM, drug comparison  
 dronabinol: DT, drug therapy  
 dronabinol: PD, pharmacology  
 etanercept: CB, drug combination  
 etanercept: DT, drug therapy  
 fish oil: CB, drug combination  
 fish oil: DT, drug therapy  
 ghrelin: AE, adverse drug reaction  
 ghrelin: CT, clinical trial  
 ghrelin: DT, drug therapy  
 ghrelin: PD, pharmacology  
 ghrelin: SC, subcutaneous drug administration  
 hormone receptor blocking agent: DT, drug therapy  
 hormone receptor blocking agent: PD, pharmacology  
 ibuprofen: CB, drug combination  
 ibuprofen: DT, drug therapy  
 icosapentaenoic acid: CT, clinical trial

## CONTROLLED TERM:

icosapentaenoic acid: CM, drug comparison  
 icosapentaenoic acid: DO, drug dose  
 icosapentaenoic acid: DT, drug therapy  
 icosapentaenoic acid: PO, oral drug administration  
 icosapentaenoic acid: PD, pharmacology  
 infliximab: CB, drug combination  
 infliximab: DT, drug therapy  
 interleukin 12: PD, pharmacology  
 interleukin 15: PD, pharmacology  
 megestrol acetate: AE, adverse drug reaction  
 megestrol acetate: CT, clinical trial  
 megestrol acetate: CB, drug combination  
 megestrol acetate: CM, drug comparison  
 megestrol acetate: DT, drug therapy  
 megestrol acetate: PD, pharmacology  
 melanocortin receptor antagonist: DT, drug therapy  
 melanocortin receptor antagonist: PD, pharmacology  
 melatonin: CT, clinical trial  
 melatonin: CB, drug combination  
 melatonin: DT, drug therapy  
 melatonin: PO, oral drug administration  
 melatonin: PD, pharmacology  
 myostatin antibody: DT, drug therapy  
 myostatin antibody: IP, intraperitoneal drug administration  
 myostatin antibody: PD, pharmacology  
 myostatin  
 n acetyl alpha interferon[4-10]cyclo[4 norleucine 5  
 aspartic acid 7 [3 (2 naphthyl)alanine] 10 lysinamide]: DT,  
 drug therapy  
 n acetyl alpha interferon[4-10]cyclo[4 norleucine 5  
 aspartic acid 7 [3 (2 naphthyl)alanine] 10 lysinamide]: PD,  
 pharmacology  
 nandrolone decanoate: CT, clinical trial  
 nandrolone decanoate: DT, drug therapy  
 nandrolone decanoate: IM, intramuscular drug administration  
 nandrolone decanoate: PD, pharmacology  
 oxandrolone: CT, clinical trial  
 oxandrolone: DT, drug therapy  
 oxandrolone: PD, pharmacology  
 pentoxifylline: CT, clinical trial  
 pentoxifylline: DT, drug therapy  
 pentoxifylline: PD, pharmacology  
 placebo  
 protein antibody: DT, drug therapy  
 protein antibody: PD, pharmacology  
 suramin: PD, pharmacology  
 thalidomide: CT, clinical trial  
 thalidomide: DT, drug therapy  
 thalidomide: PD, pharmacology  
 (cannabis derivative) 38458-58-1; (docetaxel) 114977-28-5;  
 (dronabinol) 7663-50-5; (etanercept) 185243-69-0;  
 200013-86-1; (fish oil) 8016-13-5; (ghrelin) 258279-04-8,  
 304853-26-7; (ibuprofen) 15687-27-1; (icosapentaenoic acid)  
 25378-27-2, 32839-30-8; (infliximab) 170277-31-3;  
 (interleukin 12) 138415-13-1; (megestrol acetate) 595-33-5;  
 (melatonin) 73-31-4; (myostatin) 197731-05-8; (n acetyl  
 alpha interferon[4-10]cyclo[4 norleucine 5 aspartic acid 7  
 [3 (2 naphthyl)alanine] 10 lysinamide]) 168482-23-3;  
 (nandrolone decanoate) 360-70-3; (oxandrolone) 53-39-4;  
 (pentoxifylline) 6493-05-6; (suramin) 129-46-4, 145-63-1;

## CAS REGISTRY NO.:

CHEMICAL NAME: (thalidomide) 50-35-1  
Shu 9119

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ACCESSION NUMBER: 2006380243 EMBASE Full-text  
TITLE: Ghrelin and neurohumoral antagonists in the treatment of Cachexia associated with cardiopulmonary disease.

AUTHOR: Lainscak M.; Andreas S.; Scanlon P.D.; Somers V.K.; Anker S.D.

CORPORATE SOURCE: M. Lainscak, Department of Internal Medicine, General Hospital Murska Sobota, Vrtnjaka 6, SI-9000 Murska Sobota, Slovenia

SOURCE: Internal Medicine, (1 Aug 2006) Vol. 45, No. 13, pp. 837.  
Refs: 5

COUNTRY: ISSN: 0918-2918 E-ISSN: 1349-7235 CODEN: IEDIEP  
Japan

DOCUMENT TYPE: Journal: Letter

FILE SEGMENT: 006 Internal Medicine  
037 Drug Literature Index

LANGUAGE: English

ENTRY DATE: Entered STN: 31 Aug 2006  
Last Updated on STN: 31 Aug 2006

CONTROLLED TERM: Medical Descriptors:  
\*cachexia: DT, diagnosis  
heart disease: DT, drug therapy  
lung disease  
prognosis  
chronic disease  
heart failure: DT, drug therapy  
chronic obstructive lung disease  
body composition  
muscle atrophy  
functional status  
pathophysiology  
human  
letter

CONTROLLED TERM: Drug Descriptors:  
\*ghrelin: DT, drug therapy  
neurohormone: EC, endogenous compound  
hormone antagonist: DT, drug therapy  
neurohormone antagonist: DT, drug therapy  
dipeptidyl carboxypeptidase inhibitor: DT, drug therapy  
beta adrenergic receptor blocking agent: TO, drug toxicity  
unclassified drug  
(ghrelin) 258279-04-8, 304853-26-7

CAS REGISTRY NO.: L99 ANSWER 58 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2006041505 EMBASE Full-text  
TITLE: Prescription for patients with chronic obstructive pulmonary disease: Gain weight.

AUTHOR: Spiegler P.

SOURCE: Clinical Pulmonary Medicine, (2006) Vol. 13, No. 1, pp. 69.  
ISSN: 1068-0640 CODEN: CPMEF2  
United States  
Journal: Note

COUNTRY: 015 Chest Diseases, Thoracic Surgery and Tuberculosis

030 Pharmacology  
037 Drug Literature Index  
006 Internal Medicine

LANGUAGE: English

ENTRY DATE: Entered STN: 9 Feb 2006  
Last Updated on STN: 6 Sep 2007

CONTROLLED TERM: Medical Descriptors:  
\*cachexia: DT, drug therapy  
chronic obstructive lung disease  
clinical article  
clinical trial  
controlled clinical trial  
controlled study  
disease association  
drug infusion  
drug tolerability  
food intake  
grip strength  
growth hormone blood level  
hand grip  
human  
lean body weight  
lung function  
lung pressure  
muscle strength  
noradrenalin blood level  
note  
open study  
performance  
physical capacity  
prescription  
statistical significance  
walking  
\*weight gain

CONTROLLED TERM: Drug Descriptors:  
\*ghrelin: CT, clinical trial  
\*ghrelin: DT, drug therapy  
\*ghrelin: IV, intravenous drug administration  
\*ghrelin: PD, pharmacology  
glucose: EC, endogenous compound  
growth hormone: EC, endogenous compound  
hydrocortisone: EC, endogenous compound  
insulin: EC, endogenous compound  
interleukin 6: EC, endogenous compound  
noradrenalin: EC, endogenous compound  
tumor necrosis factor alpha: EC, endogenous compound  
(ghrelin) 258279-04-8, 304853-26-7; (glucose) 50-99-7, 84778-64-3; (growth hormone) 36992-73-1, 37267-05-3, 66419-50-9, 9002-72-6; (hydrocortisone) 50-23-7; (insulin) 9004-10-8; (noradrenalin) 1407-84-7, 51-41-2

CAS REGISTRY NO.: L99 ANSWER 59 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2005421163 EMBASE Full-text  
TITLE: Ghrelin, diet, and pulmonary function.

AUTHOR: Zaloga G.P.

CORPORATE SOURCE: Dr. G.P. Zaloga, Methodist Research Institute, Wile Hall, 1812 N Capitol Ave, Indianapolis, IN 46202, United States.  
gzaloga@clarian.org

SOURCE: Chest, (2005) Vol. 128, No. 3, pp. 1084-1086.

Refs: 16  
 ISSN: 0012-3692 CODEN: CHETBF  
 Country: United States  
 Document Type: Journal: Editorial  
 File Segment: 006 Internal Medicine  
 015 Chest Diseases, Thoracic Surgery and Tuberculosis  
 037 Drug Literature Index

## LANGUAGE:

English

## ENTRY DATE:

Last Updated on STN: 20 Oct 2005

## CONTROLLED TERM:

Entered STN: 20 Oct 2005  
 Last Updated on STN: 20 Oct 2005  
 Medical Descriptors:  
 \*chronic obstructive lung disease  
 \*pulmonary hypertension  
 \*cachexia: Dr, drug therapy  
 protein function  
 protein synthesis  
 enterochromaffin cell  
 protein secretion  
 food intake  
 satiety  
 hypothalamus  
 protein expression  
 body mass  
 drug effect  
 lung function  
 dietary intake  
 appetite  
 human  
 clinical trial  
 editorial  
 priority journal  
 Drug Descriptors:  
 \*ghrelin: CT, clinical trial  
 \*ghrelin: DT, drug therapy  
 \*ghrelin: EC, endogenous compound  
 \*ghrelin: IV, intravenous drug administration  
 neuropeptide Y: EC, endogenous compound  
 cefquinome: EC, endogenous compound  
 noradrenalin: EC, endogenous compound  
 (ghrelin) 258279-04-8, 304853-26-7; (neuropeptide Y)  
 82785-45-3, 83589-17-7; (cefquinome) 84957-30-2;  
 (noradrenalin) 1407-84-7, 51-41-2

## CAS REGISTRY NO.:

L99 ANSWER 60 OF 66  
 reserved on STN

## ACCESSION NUMBER:

2005057323 EMBASE Full-text  
 Ghrelin: More than a natural GH secretagogue and/or an  
 orexigenic factor.

## AUTHOR:

Ghigo E.; Broglio F.; Arvat E.; Maccario M.; Papotti M.;  
 Muccioli G.

## CORPORATE SOURCE:

E. Ghigo, Div. of Endocrinology and Metabolism, Department  
 of Internal Medicine, University of Turin, C.so Dogliotti  
 14, 10126 Torino, Italy. ezio.ghigo@unito.it

## SOURCE:

Clinical Endocrinology, (2005) Vol. 62, No. 1, pp. 1-17.  
 Refs: 273

## COUNTRY:

ISSN: 0300-0664 CODEN: CLENAO

## DOCUMENT TYPE:

United Kingdom

## FILE SEGMENT:

Journal: General Review

## 003

Endocrinology

## 037

Drug Literature Index

## LANGUAGE:

English

## SUMMARY LANGUAGE:

English

## ENTRY DATE:

Entered STN: 18 Feb 2005

Last Updated on STN: 18 Feb 2005

ABSTRACT: Ghrelin, an acylated peptide produced predominantly by the stomach, has been discovered to be a natural ligand of the growth hormone secretagogue receptor type 1a (GHS-R1a). Ghrelin has recently attracted considerable interest as a new orexigenic factor. However, ghrelin exerts several other neuroendocrine, metabolic and also non-endocrine actions that are explained by the widespread distribution of ghrelin and GHS-R expression. The likely existence of GHS-R sub-types and evidence that the neuroendocrine actions, but not all the other actions, of ghrelin depend on its acylation in serine-3 revealed a system whose complexity had not been completely explored by studying synthetic GHS. Ghrelin secretion is mainly regulated by metabolic signals and, in turn, the modulatory action of ghrelin on the control of food intake and energy metabolism seems to be among its most important biological actions. However, according to a recent study, ghrelin-null mice are neither anorectics nor dwarfs and this evidence clearly depicts a remarkable difference from leptin null mice. Nevertheless, the original and fascinating story of ghrelin, as well as its potential pathophysiological implications in endocrinology and internal medicine, is not definitively cancelled by these data as GHS-R1a null aged mice show significant alterations in body composition and growth, in glucose metabolism, cardiac function and contextual memory. Besides potential clinical implications for natural or synthetic ghrelin analogues acting as agonists or antagonists, there are several open questions awaiting an answer. How many ghrelin receptor subtypes exist? Is ghrelin 'the' or just 'a' GHS-R ligand? That is, are there other natural GHS-R ligands? Is there a functional balance between acylated and unacylated ghrelin forms, potentially with different actions? Within the next few years suitable answers to these questions will probably be found, making it possible to gain a better knowledge of ghrelin's potential clinical perspectives.

## CONTROLLED TERM:

## Medical Descriptors:

\*hormone action  
 hormone synthesis  
 hormone structure  
 stomach  
 neuroendocrine system  
 hypothalamus hypophysis system  
 gonadotropin secreting cell  
 sleep  
 anxiety  
 metabolism  
 tissue distribution  
 gene expression  
 acylation  
 hormone release  
 regulatory mechanism  
 food intake  
 energy metabolism  
 pancreas islet  
 adipose tissue  
 liver  
 gonad  
 adrenal gland  
 thyroid gland  
 digestive system  
 knockout mouse  
 aging  
 body composition

growth  
glucose metabolism  
heart function  
memory  
contextual memory  
cell proliferation  
clinical medicine  
growth hormone deficiency: DI, diagnosis  
cachexia: TH, therapy  
eating disorder: TH, therapy  
obesity: ET, etiology  
obesity: TH, therapy  
human  
nonhuman  
review  
priority journal  
Drug Descriptors:

\*ghrelin  
\*growth hormone secretagogue  
\*appetite stimulant  
peptide hormone  
ligand  
growth hormone secretagogue receptor  
receptor subtype  
growth hormone secretagogue receptor la  
serine  
hormone derivative  
ghrelin derivative  
leptin  
prolactin  
corticotropin  
unclassified drug  
(ghrelin) 258279-04-8, 304853-26-7; (serine) 56-45-1,  
6898-95-9; (prolactin) 12585-34-1, 50647-00-2, 9002-62-4;  
(corticotropin) 11136-52-0, 9002-60-2, 9061-27-2

CAS REGISTRY NO.:

L99 ANSWER 61 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2004248737 EMBASE Full-text  
TITLE: Is there a role of ghrelin in preventing catabolism?  
AUTHOR: Janssen J.A.M.J.L.; van der Lely A.J.; Lamberts S.W.J.  
CORPORATE SOURCE: Dr. J.A.M.J.L. Janssen, Dept. of Internal Medicine, Erasmus MC, Dr Molewaterplein 40, 3000 CA Rotterdam, Netherlands.  
SOURCE: j.a.m.j.l.janssen@erasmusmc.nl  
Journal of Endocrinological Investigation, (2004) Vol. 27, No. 4, pp. 400-403.  
Refs: 23

COUNTRY: Italy ISSN: 0391-4097 CODEN: JEIND7

DOCUMENT TYPE: Journal: (Short Survey)  
FILE SEGMENT: 003 Endocrinology

016 Cancer  
017 Public Health, Social Medicine and Epidemiology  
018 Cardiovascular Diseases and Cardiovascular Surgery  
037 Drug Literature Index

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 28 Jun 2004

ABSTRACT: Last Updated on STN: 28 Jun 2004

Catabolism is a metabolic process in which muscle and fat cell tissues

are broken down in their constituent parts to provide nutrients and energy for the body. Whilst undoubtedly a potent stimulator of GH secretion in pharmacological doses, at present no clear physiological role for ghrelin in the regulation of GH secretion has been identified in man. In addition to its GH-releasing properties, ghrelin stimulates food intake and adipogenesis. The role of ghrelin has been extensively studied in three human models of catabolism: anorexia nervosa, cardiac cachexia and cancer cachexia. In this review we discuss the role of ghrelin in the etiology and treatment of catabolism using these three human models of catabolism. In the presence of clear catabolism in all the three conditions plasma total ghrelin levels are increased, suggesting that ghrelin does not increase food intake and/or anabolism in these circumstances. In addition, it is at present unknown whether administration of additional ghrelin in these conditions may reduce (or attenuate) the development of cachexia. In conclusion, the anabolic effects of ghrelin in man have still to be demonstrated. .COPYGT. 2004, Editrice Kurtis.

# CONTROLLED TERM:

## Medical Descriptors:

\*anorexia nervosa: DT, drug therapy  
\*anorexia nervosa: ET, etiology  
\*anorexia nervosa: PC, prevention  
\*cachexia: CO, complication  
\*cachexia: DT, drug therapy  
\*cachexia: ET, etiology  
\*cachexia: PC, prevention

catabolism  
muscle cell  
adipocyte  
nutrient supply  
growth hormone release  
food intake  
lipogenesis  
disease model  
biosynthesis  
pathogenesis  
diet restriction

wasting syndrome: CO, complication  
wasting syndrome: DT, drug therapy  
wasting syndrome: ET, etiology  
wasting syndrome: PC, prevention  
heart failure  
malignant neoplastic disease.  
human  
nonhuman  
rat

Controlled study  
short survey  
Drug Descriptors:

\*ghrelin: DT, drug therapy  
\*ghrelin: EC, endogenous compound  
growth hormone: EC, endogenous compound  
leptin: EC, endogenous compound  
placebo  
(ghrelin) 258279-04-8, 304853-26-7; (growth hormone)  
36992-73-1, 37267-05-3, 66419-50-9, 9002-72-6

CAS REGISTRY NO.:

L99 ANSWER 62 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN  
ACCESSION NUMBER: 2005042586 EMBASE Full-text  
TITLE: GHRH and GH secretagogues: Clinical perspectives and safety.

**AUTHOR:** Aimaretti G.; Baldelli R.; Corneli G.; Bellone S.; Rovere S.; Croce C.; Ragazzoni F.; Giordano R.; Arvat E.; Bona G.; Ghigo E.  
**CORPORATE SOURCE:** Dr. E. Ghigo, Div. of Endocrinology and Metabolism, Department of Internal Medicine, University of Turin, C.so Dogliotti 14, 10126 Torino, Italy. exio.ghigo@unito.it  
**SOURCE:** Pediatric Endocrinology Reviews, (2004) Vol. 2, No. SUPPL. 1, pp. 86-92.  
 Refs: 51  
 ISSN: 1565-4753  
**COUNTRY:** Israel  
**DOCUMENT TYPE:** Journal: General Review  
**FILE SEGMENT:** 003 Endocrinology  
 007 Pediatrics and Pediatric Surgery  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
**LANGUAGE:** English  
**SUMMARY LANGUAGE:** English  
**ENTRY DATE:** Entered STN: 10 Feb 2005  
 Last Updated on STN: 10 Feb 2005

**ABSTRACT:** The diagnosis and treatment of growth hormone deficiency (GHD), as well as the possibility of counteracting somatopause and age-related changes in body composition, structural functions, and metabolism, prompted interest in potential clinical uses of GH-releasing hormone (GHRH) and GH secretagogues (GHS). GHD often reflects hypothalamic GHRH deficiency and it has been clearly demonstrated that the age-related decline in the function of the GH/IGF-I axis reflects a reduction in hypothalamic function as evidenced by the preservation of the releasable pool of pituitary GH in aged subjects. The effectiveness of recombinant human GH (rhGH) is well established, but it is also recognized that GH replacement does not mimic physiological GH secretion which theoretically would be restored by GHRH and/or GHS. At present, it has been clearly demonstrated that GHRH and/or GHS represent reliable tools for the diagnosis of GHD. On the other hand, neither GHRH nor GHS has been shown to provide effective alternatives to rhGH for the treatment of GHD. Although GHRH and/or GHS represent the most logical approaches for the restoration of the GH/IGF-I axis to a youthful level of activity and for counteracting the somatopause, this hypothesis has never been proven definitively. Conceptually, GHRH replacement would be the most physiological approach and its safety is guaranteed, provided an appropriate dose is used, in order to avoid hyperactivity of the GH/IGF-I axis. However, a long-acting preparation is needed. On the other hand, GHS, e.g., ghrelin analogues, could be considered as a function of their selectivity of action. However, ghrelin has a wide spectrum of endocrine and non-endocrine actions at both central and peripheral levels. Thus, non-selective GHS, although available in orally active forms, could elicit unforeseen side effects. Previous studies with GHRH and/or GHS in aging patients provided encouraging results. However, it still remains to be definitively demonstrated that aged subjects would benefit from chronic treatment with these molecules.

**CONTROLLED TERM:** Medical Descriptors:  
 \*growth hormone deficiency: DI, diagnosis  
 \*growth hormone deficiency: DT, drug therapy  
 \*growth hormone deficiency: ET, etiology  
 childhood disease: DI, diagnosis  
 childhood disease: DT, drug therapy  
 adult disease: DI, diagnosis  
 adult disease: DT, drug therapy  
 drug safety  
 hormone response  
 growth hormone release

aging  
 geriatric disorder: DT, drug therapy  
 somatopause: DT, drug therapy  
 drug mechanism  
 provocation test  
 somatic cell  
 insulin tolerance test  
 drug bioavailability  
 drug potentiation  
 drug effect  
 postmenopause osteoporosis: DT, drug therapy  
 fluid retention  
 side effect: SI, side effect  
 carpal tunnel syndrome: SI, side effect  
 hyperglycemia: SI, side effect  
 metabolic disorder: SI, side effect  
 human  
 nonhuman  
 clinical trial  
 child  
 review  
**Drug Descriptors:**  
 \*growth hormone releasing factor: AE, adverse drug reaction  
 \*growth hormone releasing factor: CT, clinical trial  
 \*growth hormone releasing factor: CB, drug combination  
 \*growth hormone releasing factor: IT, drug interaction  
 \*growth hormone releasing factor: DT, drug therapy  
 \*growth hormone releasing factor: PK, pharmacokinetics  
 \*growth hormone releasing factor: PD, pharmacology  
 \*growth hormone releasing factor: IV, intravenous drug administration  
 \*growth hormone releasing factor: PO, oral drug administration  
 \*growth hormone releasing factor: PA, parenteral drug administration  
 \*growth hormone releasing factor: SC, subcutaneous drug administration  
 \*growth hormone secretagogue: AE, adverse drug reaction  
 \*growth hormone secretagogue: CB, drug combination  
 \*growth hormone secretagogue: IT, drug interaction  
 \*growth hormone secretagogue: DT, drug therapy  
 \*growth hormone secretagogue: PD, pharmacology  
 \*growth hormone secretagogue: IV, intravenous drug administration  
 \*growth hormone secretagogue: PO, oral drug administration  
 ghrelin: CB, drug combination  
 ghrelin: IV, intravenous drug administration  
 ghrelin derivative: CB, drug combination  
 ghrelin derivative: PD, pharmacology  
 ghrelin derivative: IV, intravenous drug administration  
 ghrelin derivative: PO, oral drug administration  
 arginine: CB, drug combination  
 arginine: PD, pharmacology  
 arginine: IV, intravenous drug administration  
 pyridostigmine: CB, drug combination  
 pyridostigmine: PD, pharmacology  
 pyridostigmine: PO, oral drug administration  
 propranolol: CB, drug combination

propranolol: PD, pharmacology  
 galanin: CB, drug combination  
 galanin: PD, pharmacology  
 histidyl dextro tryptophylalanyltryptophyl dextro  
 phenylalanylsinamide: CB, drug combination  
 histidyl dextro tryptophylalanyltryptophyl dextro  
 phenylalanylsinamide: PD, pharmacology  
 histidyl dextro tryptophylalanyltryptophyl dextro  
 phenylalanylsinamide: IV, intravenous drug administration  
 growth hormone  
 somatomedin C

somatomedin binding protein 3  
 recombinant growth hormone: DT, drug therapy  
 ibutamoren: CT, clinical trial  
 ibutamoren: DO, drug dose  
 ibutamoren: PK, pharmacokinetics  
 ibutamoren: PD, pharmacology  
 ibutamoren: PO, oral drug administration  
 growth hormone releasing factor[1-29]: AE, adverse drug  
 reaction  
 growth hormone releasing factor[1-29]: CT, clinical trial  
 growth hormone releasing factor[1-29]: CB, drug combination  
 growth hormone releasing factor[1-29]: DT, drug therapy  
 growth hormone releasing factor[1-29]: PD, pharmacology  
 growth hormone releasing factor[1-29]: IV, intravenous drug  
 administration  
 growth hormone releasing factor[1-29]: SC, subcutaneous  
 drug administration  
 growth hormone releasing hormone derivative: PD,  
 pharmacology  
 growth hormone releasing hormone derivative: SC,  
 subcutaneous drug administration  
 alendronic acid: CT, clinical trial  
 alendronic acid: CB, drug combination  
 alendronic acid: DT, drug therapy  
 alendronic acid: PD, pharmacology  
 unclassified drug  
 (growth hormone releasing factor) 83930-13-6, 9034-39-3;  
 (ghrelin) 258279-04-8, 304853-26-7; (arginine) 1119-34-2,  
 1595-35-4, 7004-12-8, 74-79-3; (pyridostigmine) 101-26-8,  
 155-97-5; (propranolol) 13013-17-7, 318-98-9, 3506-09-0,  
 4199-09-1, 525-66-6; (galanin) 88813-36-9; (histidyl dextro  
 tryptophylalanyltryptophyl dextro phenylalanylsinamide)  
 87616-84-0; (growth hormone) 36992-73-1, 37267-05-3,  
 66419-50-9, 9002-72-6; (somatomedin C) 67763-96-6;  
 (ibutamoren) 159752-10-0; (growth hormone releasing  
 factor[1-29]) 90830-28-7; (alendronic acid) 66376-36-1  
 MK 0677

## CHEMICAL NAME:

L99 ANSWER 63 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights  
 reserved on STN  
 ACCESSION NUMBER: 2003330461 EMBASE Full-text  
 TITLE: Patent developments in anabolic agents for treatment of  
 bone diseases.  
 AUTHOR: Mos J.A.; Lundy M.W.  
 CORPORATE SOURCE: J.A. Mos, Procter and Gamble Pharmaceuticals, 8700  
 Mason-Montgomery Road, Mason, OH 45040-8006, United States.  
 Source: Expert Opinion on Therapeutic Patents, (1 Aug 2003) Vol.  
 13, No. 8, pp. 1141-1156.

Refs: 70  
 ISSN: 1354-3776 CODEN: EOTPEG  
 United Kingdom  
 Journal: General Review  
 030 Pharmacology  
 031 Arthritis and Rheumatism  
 033 Orthopedic Surgery  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 039 Pharmacy

## LANGUAGE:

English

## SUMMARY LANGUAGE:

English

## ENTRY DATE:

Entered STN: 4 Sep 2003

Last Updated on STN: 4 Sep 2003

ABSTRACT: A review of the patent literature encompassing the past 3 years  
 (.apprx. 2000-2003) in the area of bone anabolic therapies for treatment of  
 osteoporosis and related diseases is described. A variety of potential  
 therapeutics are covered, as well as improvement attempts on the first approved  
 bone anabolic agent, recombinant human parathyroid hormone (rPTH;  
 teriparatide, Forteo®, Eli Lilly & Co.). The patent literature suggests  
 that multiple strategies are currently being pursued in order to deliver the  
 first orally bioavailable anabolic agent to the market and that a variety of  
 new targets are also being evaluated for further development.

## CONTROLLED TERM:

Medical Descriptors:

\*metabolic bone disease: DT, drug therapy  
 \*metabolic bone disease: SI, side effect  
 \*osteoporosis: DT, drug therapy  
 patent  
 drug approval  
 drug delivery system  
 drug marketing  
 drug targeting  
 drug efficacy  
 hypercalcemia: SI, side effect  
 osteosarcoma: SI, side effect  
 drug structure  
 drug half life  
 human  
 clinical trial  
 review

## CONTROLLED TERM:

Drug Descriptors:

\*anabolic agent: AE, adverse drug reaction  
 \*anabolic agent: CT, clinical trial  
 \*anabolic agent: AD, drug administration  
 \*anabolic agent: AN, drug analysis  
 \*anabolic agent: CB, drug combination  
 \*anabolic agent: CM, drug comparison  
 \*anabolic agent: DV, drug development  
 \*anabolic agent: DT, drug therapy  
 \*anabolic agent: PR, pharmaceuticals  
 \*anabolic agent: PK, pharmacokinetics  
 \*anabolic agent: PD, pharmacology  
 \*anabolic agent: IH, inhalational drug administration  
 \*anabolic agent: PO, oral drug administration  
 \*anabolic agent: SC, subcutaneous drug administration  
 recombinant human parathyroid hormone: AE, adverse drug  
 reaction  
 recombinant human parathyroid hormone: AD, drug  
 administration

recombinant human parathyroid hormone: DT, drug therapy  
 recombinant human parathyroid hormone: PR, pharmaceuticals  
 recombinant human parathyroid hormone: SC, subcutaneous  
 drug administration  
 parathyroid hormone: AE, adverse drug reaction  
 parathyroid hormone: CT, clinical trial  
 parathyroid hormone: AD, drug administration  
 parathyroid hormone: CB, drug combination  
 parathyroid hormone: CM, drug comparison  
 parathyroid hormone: DT, drug therapy  
 parathyroid hormone: EC, endogenous compound  
 parathyroid hormone: PR, pharmaceuticals  
 parathyroid hormone: PK, pharmacokinetics  
 parathyroid hormone: PD, pharmacology  
 parathyroid hormone: IH, inhalational drug administration  
 parathyroid hormone: PO, oral drug administration  
 parathyroid hormone[1-34]: AE, adverse drug reaction  
 parathyroid hormone[1-34]: AD, drug administration  
 parathyroid hormone[1-34]: DT, drug therapy  
 parathyroid hormone[1-34]: PR, pharmaceuticals  
 parathyroid hormone[1-34]: SC, subcutaneous drug  
 administration  
 bisphosphonic acid derivative: CB, drug combination  
 bisphosphonic acid derivative: DT, drug therapy  
 bisphosphonic acid derivative: PD, pharmacology  
 alendronic acid: CB, drug combination  
 alendronic acid: DT, drug therapy  
 alendronic acid: PD, pharmacology  
 risedronic acid: CB, drug combination  
 risedronic acid: DT, drug therapy  
 risedronic acid: PD, pharmacology  
 parathyroid hormone related protein: AE, adverse drug  
 reaction  
 parathyroid hormone related protein: CM, drug comparison  
 parathyroid hormone related protein: DT, drug therapy  
 parathyroid hormone related protein: PR, pharmaceuticals  
 parathyroid hormone related protein: PD, pharmacology  
 parathyroid hormone derivative: AE, adverse drug reaction  
 parathyroid hormone derivative: CT, clinical trial  
 parathyroid hormone derivative: AD, drug administration  
 parathyroid hormone derivative: CB, drug combination  
 parathyroid hormone derivative: CM, drug comparison  
 parathyroid hormone derivative: DT, drug therapy  
 parathyroid hormone derivative: PR, pharmaceuticals  
 parathyroid hormone derivative: PK, pharmacokinetics  
 parathyroid hormone derivative: PD, pharmacology  
 parathyroid hormone derivative: IH, inhalational drug  
 administration  
 parathyroid hormone derivative: PO, oral drug  
 administration  
 parathyroid hormone derivative: SC, subcutaneous drug  
 administration  
 parathyroid hormone[1-84]: AE, adverse drug reaction  
 parathyroid hormone[1-84]: CT, clinical trial  
 parathyroid hormone[1-84]: AD, drug administration  
 parathyroid hormone[1-84]: CM, drug comparison  
 parathyroid hormone[1-84]: DT, drug therapy  
 parathyroid hormone[1-84]: PR, pharmacokinetics  
 parathyroid hormone[1-84]: PD, pharmacology

parathyroid hormone[1-84]: SC, subcutaneous drug  
 administration  
 calcium antagonist: AN, drug analysis  
 calcium antagonist: CB, drug combination  
 calcium antagonist: DT, drug therapy  
 calcium antagonist: PD, pharmacology  
 2 chloro 6 [3 [1,1 dimethyl 2 (2 naphthyl)ethylamino] 2  
 hydroxypropoxy]benzonitrile: AN, drug analysis  
 2 chloro 6 [3 [1,1 dimethyl 2 (2 naphthyl)ethylamino] 2  
 hydroxypropoxy]benzonitrile: CB, drug combination  
 2 chloro 6 [3 [1,1 dimethyl 2 (2 naphthyl)ethylamino] 2  
 hydroxypropoxy]benzonitrile: DT, drug therapy  
 2 chloro 6 [3 [1,1 dimethyl 2 (2 naphthyl)ethylamino] 2  
 hydroxypropoxy]benzonitrile: PD, pharmacology  
 estrogen: CB, drug combination  
 estrogen: DT, drug therapy  
 estrogen: PD, pharmacology  
 growth hormone: EC, endogenous compound  
 growth hormone receptor: EC, endogenous compound  
 recombinant growth hormone: DT, drug therapy  
 recombinant growth hormone: SC, subcutaneous drug  
 administration  
 prednisone: AE, adverse drug reaction  
 prednisone: PO, oral drug administration  
 glucocorticoid: AE, adverse drug reaction  
 glucocorticoid: PO, oral drug administration  
 growth hormone secretagogue: DT, drug therapy  
 growth hormone secretagogue: PD, pharmacology  
 ghrelin derivative: DV, drug development  
 ghrelin derivative: DT, drug therapy  
 ghrelin derivative: PD, pharmacology  
 ghrelin: DV, drug development  
 ghrelin: DT, drug therapy  
 ghrelin: PD, pharmacology  
 ibutamoren: AN, drug analysis  
 ibutamoren: DV, drug development  
 ibutamoren: DT, drug therapy  
 ibutamoren: PD, pharmacology  
 ibutamoren: PO, oral drug administration  
 somatomedin: DV, drug development  
 somatomedin: DT, drug therapy  
 somatomedin: PD, pharmacology  
 vitamin D derivative: CT, clinical trial  
 vitamin D derivative: AN, drug analysis  
 vitamin D derivative: DV, drug development  
 vitamin D derivative: DT, drug therapy  
 vitamin D derivative: PD, pharmacology  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: CT,  
 clinical trial  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: AN,  
 drug analysis  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: CB,  
 drug combination  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: DT,  
 drug therapy  
 hydroxymethylglutaryl coenzyme A reductase inhibitor: PD,  
 pharmacology  
 phosphodiesterase inhibitor: AN, drug analysis  
 phosphodiesterase inhibitor: DT, drug therapy  
 phosphodiesterase inhibitor: PD, pharmacology

prostaglandin derivative: AM, drug analysis  
 prostaglandin derivative: DT, drug therapy  
 prostaglandin derivative: PD, pharmacology  
 oxytocin: DT, drug therapy  
 oxytocin: PD, pharmacology  
 oxytocin derivative: DT, drug therapy  
 oxytocin derivative: PD, pharmacology  
 unindexed drug  
 unclassified drug  
 Jtc 22

CAS REGISTRY NO.:  
 (parathyroid hormone) 12584-96-2, 68893-82-3, 9002-64-6;  
 (parathyroid hormone[1-34]) 12583-68-5, 52332-67-4;  
 (alendronic acid) 66376-36-1; (risedronic acid)  
 105462-24-6, 122458-82-6; (2-chloro 6 [3 [1,1 dimethyl 2 (2  
 naphthyl)ethylamino] 2-hydroxypropoxy]benzonitrile)  
 284035-33-2, 324523-20-8; (growth hormone) 36992-73-1,  
 37267-05-3, 66419-50-9, 9002-72-6; (prednisone) 53-03-2;  
 (ghrelin) 258279-04-8, 304853-26-7; (ibutamoren)  
 159752-10-0; (oxytocin) 50-56-6, 54577-94-5  
 (1) Forteo: (2) Fosamax: (3) Actonel: (4) Nps 2143: (5) Jtc  
 22: (6) Mk 0677

CHEMICAL NAME:  
 (1) Lilly; (2) Instituto Gentili; (3) Norwich Eaton; (4)  
 NPS; (5) Japan Tobacco; (6) Merck; Tanabe; Ono; Procter and  
 Gamble; Alcon; Allergan; Bristol Myers Squibb; Hoechst  
 Marion Roussel; Bayer; Pfizer; Novartis

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ACCESSION NUMBER: 2003459309 EMBASE Full-text

TITLE: Ghrelin and the Endocrine Pancreas.

AUTHOR: Broglio F.; Gottero C.; Benso A.; Prodham F.; Volante M.;  
 Defestanis S.; Gauna C.; Muccioli G.; Papotti M.; Van Der  
 Lely A.J.; Ghigo E.

CORPORATE SOURCE: Dr. E. Ghigo, Div. of Endocrinology and Metabolism,  
 Department of Internal Medicine, University of Turin, 14  
 10126 Turin, Italy. ezio.ghigo@unito.it

SOURCE: Endocrine, (2003) Vol. 22, No. 1, pp. 19-24. .

Refs: 61

ISSN: 0969-711X CODEN: EOCRES

COUNTRY: United States

DOCUMENT TYPE: Journal: General Review

FILE SEGMENT: 003 Endocrinology

030 Pharmacology

037 Drug Literature Index

048 Gastroenterology

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 4 Dec 2003

Last Updated on STN: 4 Dec 2003

ABSTRACT: Ghrelin is a 28-amino-acid peptide predominantly produced by the stomach, while substantially lower amounts derive from other tissues including the pancreas. It is a natural ligand of the GH secretagogue (GHS) receptor (GHS-R1a) and strongly stimulates GH secretion, but acylation in serine 3 is needed for its activity. Ghrelin also possesses other endocrine and nonendocrine actions reflecting central and peripheral GHS-R distribution including the pancreas. The wide spectrum of ghrelin activities includes orexigenic effect, control of energy expenditure, and peripheral gastroenteropancreatic actions. Circulating ghrelin levels mostly reflect gastric secretion as indicated by evidence that they are reduced by 80% after gastrectomy and even after gastric by-pass surgery. Ghrelin secretion is

increased in anorexia and cachexia but reduced in obesity, a notable exception being Prader-Willi syndrome. The negative association between ghrelin secretion and body weight is emphasized by evidence that weight increase and decrease reduces and augments circulating ghrelin levels in anorexia and obesity, respectively, and agrees with the clear negative association between ghrelin and insulin levels. In fact, ghrelin secretion is increased by fasting whereas it is decreased by glucose load as well as during euglycemic clamp but not after arginine or free fatty acid load in normal subjects; in physiological conditions, however, the most remarkable inhibitory input on ghrelin secretion is represented by somatostatin as well as by its natural analog cortistatin that concomitantly reduce  $\beta$ -cell secretion. This evidence indicates that the endocrine pancreas plays a role in directly or indirectly modulating ghrelin secretion. As anticipated, ghrelin, in turn, is expressed within the endocrine pancreas, although it is still matter of debate if it is expressed by  $\beta$ -,  $\alpha$ -, or non- $\alpha$ /non- $\beta$  cells. Moreover, GHS-R1a expression in the pancreas has been demonstrated by many authors. Some impact of synthetic GHS on insulin secretion and glucose metabolism had been reported in both animal and human studies. Depending on dose and experimental conditions ghrelin has been shown able to inhibit or stimulate insulin secretion in animals. In humans, ghrelin administration is followed by transient inhibition of insulin levels that surprisingly follows persistent increase in plasma glucose levels suggesting that ghrelin would also directly or indirectly activate glycogenolysis. Current studies indicate that ghrelin also blunts the insulin response to arginine but not that to oral glucose load in humans. These acute effects of ghrelin are independent of any cholinergic mediation and are not shared by synthetic, peptidyl GHS indicating they are likely mediated by a non-GHS-R1a receptor. These acute effects of ghrelin on insulin secretion would be short-lasting, and it has to be remembered that long-term treatment with synthetic non-peptidyl GHS in healthy elderly subjects was followed by insulin resistance. In all, it is already clear that ghrelin has remarkable impact in modulating insulin secretion and glucose metabolism. Insulin and ghrelin secretions seem linked by a negative functional relationship that strengthens the hypothesized role of ghrelin in participating in the management of the neuroendocrine and metabolic response to variations in energy balance.

# CONTROLLED TERM:

Medical Descriptors:  
 \*hormone action  
 \*pancreas function  
 hormone release  
 hormone synthesis  
 hormone receptor interaction  
 growth hormone release  
 acylation  
 protein modification  
 appetite  
 anorexia  
 hormone blood level  
 stomach secretion  
 gastrectomy  
 stomach bypass  
 stomach surgery  
 cachexia  
 obesity  
 Prader Willi syndrome  
 body weight  
 insulin blood level  
 diet restriction  
 glucose tolerance test  
 pancreas islet beta cell



protein expression  
insulin release  
glucose metabolism  
glucose blood level  
glycogenolysis  
cholinergic activity  
aging  
energy balance  
food intake  
drug activity  
human  
nonhuman  
review  
priority journal  
Drug Descriptors:  
\*ghrelin: EC, endogenous compound  
\*hormone derivative: DO, drug dose  
\*hormone derivative: PD, pharmacology  
\*hormone derivative: PO, oral drug administration  
\*ghrelin derivative: DO, drug dose  
\*ghrelin derivative: PD, pharmacology  
\*ghrelin derivative: PO, oral drug administration  
growth hormone secretagogue receptor 1a: EC, endogenous compound  
growth hormone secretagogue receptor: EC, endogenous compound  
somatostatin  
somatostatin derivative: PD, pharmacology  
cortistatin: PD, pharmacology  
growth hormone secretagogue: PD, pharmacology  
growth hormone secretagogue: PO, oral drug administration  
insulin: EC, endogenous compound  
glucose: EC, endogenous compound  
unclassified drug  
(ghrelin) 258279-04-8, 304853-26-7; (somatostatin) 38916-34-6, 5110-01-1; (insulin) 9004-10-8; (glucose) 50-99-7, 84778-64-3

CAS REGISTRY NO.:

L99 ANSWER 65 OF 66 EMBASE COPYRIGHT (c) 2007 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2001350166 EMBASE Full-text  
TITLE: Structural similarity of ghrelin derivatives to peptidyl growth hormone secretagogues.  
AUTHOR: Matsumoto M.; Kitajima Y.; Iwanami T.; Hayashi Y.; Tanaka S.; Minamitake Y.; Hosoda H.; Kojima M.; Matsuo H.; Kangawa K.  
CORPORATE SOURCE: Y. Minamitake, Suntory Inst. Med. Res. and Devt., 2716-1 Kurakawa, Akaiwa, Ohra-gun, Gunma 370-0503, Japan.  
SOURCE: Yoshiharu Minamitake@suntory.co.jp  
Biochemical and Biophysical Research Communications, (2001) Vol. 284, No. 3, pp. 655-659.

COUNTRY: Refs: 12  
ISSN: 0006-291X CODEN: BBRCA  
United States  
DOCUMENT TYPE: Journal, Article  
FILE SEGMENT: 003 Endocrinology  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 25 Oct 2001

ABSTRACT: Ghrelin is a 28-amino acid residue endogenous growth hormone secretagogue. Intensive investigations revealed that the N-terminus tetrapeptide, having octanoyl group at Ser(3), is the minimum active core. In this study, we further explored the structure-function relationships of the active N-terminus portion of ghrelin using a Ca(2+) mobilization assay. The smallest and most potent ghrelin derivative we have found so far is 5-aminopentanoyl-Ser(Octyl)-Phe-Leu-aminoethylamide, showing comparable activity to the natural molecule. In the process of modifying the active core, the ghrelin-derived short analogues emerged structurally close to peptidyl growth hormone secretagogues. The N-terminus modification suggested that Gly(1)-Ser(2) unit works as a spacer, forming adequate distance between N(alpha)-amino group and n-octanoyl group. Replacement of 3rd and 4th amino acid residues to D-isomer suggested that the N-terminal dipeptide contributes to shape the biologically active geometry by effecting conformation of residues in positions 3 and 4. .COPYRG. 2001 Academic Press.

CONTROLLED TERM: Medical Descriptors:  
\*growth hormone release  
amino acid sequence  
protein conformation  
geometry  
hormone structure  
peptide synthesis  
article  
priority journal  
Drug Descriptors:  
\*growth hormone  
\*ghrelin derivative  
unclassified drug  
(growth hormone) 36992-73-1, 37267-05-3, 66419-50-9, 9002-72-6

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ACCESSION NUMBER: 2001019512 EMBASE Full-text  
TITLE: Structure - Function studies on the new growth hormone-releasing peptide, ghrelin: Minimal sequence of ghrelin necessary for activation of growth hormone secretagogue receptor 1a.  
AUTHOR: Bednarek M.A.; Feighner S.D.; Pong S.-S.; McKee K.K.; Hreniuk D.L.; Silva M.V.; Warren V.A.; Howard A.D.; Van der Ploeg L.H.Y.; Heck J.V.  
CORPORATE SOURCE: M.A. Bednarek, Department of Medicinal Chemistry, Merck Research Laboratories, R50G-141, P.O. Box 2000, Rahway, NJ 07065, United States. maria\_bednarek@merck.com  
SOURCE: Journal of Medicinal Chemistry, (16 Nov 2000) Vol. 43, No. 23, pp. 4370-4376. Refs: 18

COUNTRY: ISSN: 0022-2623 CODEN: JMCMAR  
United States  
DOCUMENT TYPE: Journal, Article  
FILE SEGMENT: 030 Pharmacology  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
ENTRY DATE: Entered STN: 1 Feb 2001

ABSTRACT: The recently discovered growth hormone secretagogue, ghrelin, is a potent agonist at the human growth hormone secretagogue receptor 1a (hGHSR1a).

To elucidate structural features of this peptide necessary for efficient binding to and activation of the receptor, several analogues of ghrelin with various aliphatic or aromatic groups in the side chain of residue 3, and several short peptides derived from ghrelin, were prepared and tested in a binding assay and in an assay measuring intracellular calcium elevation in HEK-293 cells expressing hGHSR1a. Bulky hydrophobic groups in the side chain of residue 3 turned out to be essential for maximum agonist activity. Also, short peptides encompassing the first 4 or 5 residues of ghrelin were found to functionally activate hGHSR1a about as efficiently as the full-length ghrelin. Thus the entire sequence of ghrelin is not necessary for activity: the Gly-Ser-Ser(n-octanoyl)-Phe segment appears to constitute the "active core" required for agonist potency at hGHSR1a.

CONTROLLED TERM:

Medical Descriptors:

\*structure activity relation

amino acid sequence

drug structure

drug activity

drug synthesis

drug receptor binding

assay

calcium cell level

human

controlled study

human cell

article

Drug Descriptors:

\*growth hormone releasing factor derivative: AN, drug

analysis

\*growth hormone releasing factor derivative: CM, drug

comparison

\*growth hormone releasing factor derivative: DV, drug

development

\*growth hormone releasing factor derivative: PD,

pharmacology

\*ghrelin derivative: AN, drug analysis

\*ghrelin derivative: CM, drug comparison

\*ghrelin derivative: DV, drug development

\*ghrelin derivative: PD, pharmacology

\*growth hormone releasing factor receptor: EC, endogenous

compound

calcium: EC, endogenous compound

pralmorelin: AN, drug analysis

pralmorelin: CM, drug comparison

pralmorelin: PD, pharmacology

growth hormone releasing peptide 1: AN, drug analysis

growth hormone releasing peptide 1: CM, drug comparison

growth hormone releasing peptide 1: PD, pharmacology

hexarelin: AN, drug analysis

hexarelin: CM, drug comparison

hexarelin: PD, pharmacology

ibutamoren: AN, drug analysis

ibutamoren: CM, drug comparison

ibutamoren: DV, drug development

ibutamoren: PD, pharmacology

unclassified drug

(calcium) 7440-70-2; (pralmorelin) 158861-67-7; (hexarelin)

140703-51-1; (ibutamoren) 159752-10-0

Mk 0677

CAS REGISTRY NO.:

CHEMICAL NAME:

FILE 'HOME' ENTERED AT 14:53:27 ON 20 SEP 2007

## SEARCH HISTORY

=> d his nofile

(FILE 'HOME' ENTERED AT 13:57:23 ON 20 SEP 2007)

FILE 'CAPLUS' ENTERED AT 13:57:30 ON 20 SEP 2007

E US2006-567406/APPS

L1 1 SEA ABB=ON US2006-567406/AP

D SCAN

L2 608 SEA ABB=ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU

L3 1134 SEA ABB=ON HANSEN C?/AU

L4 1 SEA ABB=ON COPENHAGEN H?/AU

D SCAN L4

L5 471 SEA ABB=ON NILSSON H?/AU

L6 1 SEA ABB=ON L2 AND L3 AND (L4 OR L5)

FILE 'REGISTRY' ENTERED AT 13:59:56 ON 20 SEP 2007

L7 1 SEA ABB=ON 304853-26-7

D SCAN

FILE 'CAPLUS' ENTERED AT 14:00:10 ON 20 SEP 2007

L8 75 SEA ABB=ON L7/D

E CACHEXIA+ALL/CT

L9 3047 SEA ABB=ON CACHEXIA/OBI

L10 1571 SEA ABB=ON WASTING/OBI

L11 20291 SEA ABB=ON APPETITE/OBI

L12 5750 SEA ABB=ON MALNUTRITION/OBI

L13 23 SEA ABB=ON L8 AND (L9 OR L10 OR L11 OR L12)

L14 497406 SEA ABB=ON NEOPLAS?/OBI

L15 30 SEA ABB=ON L8 AND (L9 OR L10 OR L11 OR L12 OR L14)

L16 7 SEA ABB=ON L15 NOT L13

D SCAN TI

L17 29 SEA ABB=ON L8 (L1 THU OR PAC OR PKT OR DMA)/RL

L18 2 SEA ABB=ON L8 (L1 BAC)/RL

D SCAN

L19 27682 SEA ABB=ON BODY WEIGHT/CT

L20 35 SEA ABB=ON L8-AND ((L9 OR L10 OR L11 OR L12 OR L19) OR (L17 AND L14))

L21 5 SEA ABB=ON (L2 OR L3 OR L4 OR L5) AND L8

L22 5 SEA ABB=ON (L1 OR L21)

D AB L1

SEL RN L1

FILE 'REGISTRY' ENTERED AT 14:07:31 ON 20 SEP 2007

L23 84 SEA ABB=ON (304853-26-7/BI OR 258279-04-8/BI OR 307950-60-3/BI OR 313951-59-6/BI OR 321974-46-3/BI OR 321974-68-9/BI OR 57-88-5/BI OR 603973-45-1/BI OR 603973-46-2/BI OR 613670-28-3/BI OR 613670-31-8/BI OR 63-89-8/BI OR 67763-96-6/BI OR 843660-25-3/BI OR 845463-09-4/BI OR 845463-10-7/BI OR 845463-11-8/BI OR 845463-12-9/BI OR 845463-13-0/BI OR 845463-14-1/BI OR 845463-15-2/BI OR 845463-16-3/BI OR 845463-17-4/BI OR 845463-18-5/BI OR 845463-19-6/BI OR 845463-20-9/BI OR 845463-21-0/BI OR 845463-22-1/BI OR 845463-23-2/BI OR 845463-24-3/BI OR 845463-25-4/BI OR 845463-26-5/BI OR 845463-27-6/BI OR 845463-28-7/BI OR 845463-29-8/BI OR 845463-30-1/BI OR 845463-31-2/BI OR 845463-32-3/BI OR 845463-33-4/BI OR 845463-34-5/BI OR 845463-35-6/BI OR 845463-36-7/BI OR 845463-37-8/BI OR 845463-38-9/BI OR 845463-39-0/BI OR 845463-40-3/BI OR 845463-41-4/BI OR 845463-42-5/BI OR 845463-43-6/BI OR 845463-44-7/BI OR 845463-45-8/BI OR 845463-46-9/BI OR

845463-47-0/BI OR 845463-48-1/BI OR 845463-49-2/BI OR 845463-50-5/BI OR 845463-51-6/BI OR 845463-52-7/BI OR 845463-53-8/BI OR 845463-54-9/BI OR 845463-55-0/BI OR 845463-56-1/BI OR 845463-57-2/BI OR 845463-58-3/BI OR 845463-59-4/BI OR 845463-60-7/BI OR 845463-61-8/BI OR 845463-62-9/BI OR 845463-63-0/BI OR 845463-64-1/BI OR 845463-65-2/BI OR 845463-66-3/BI OR 845463-67-4/BI OR 845463-68-5/BI OR 845463-69-6/BI OR 845463-70-9/BI OR 845463-71-0/BI OR 845463-72-1/BI OR 845463-73-2/BI OR 845463-74-3/BI OR 845463-75-4/BI OR 845463-76-5/BI OR 845463-77-6/BI OR 845463-78-7/BI)  
D SCAN

FILE 'STNGUIDE' ENTERED AT 14:08:12 ON 20 SEP 2007

FILE 'MEDLINE' ENTERED AT 14:10:04 ON 20 SEP 2007

L24 471 SEA ABB-ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
L25 845 SEA ABB-ON HANSEN C?/AU  
L26 300 SEA ABB-ON COPENHAGEN H?/AU OR NILSSON H?/AU  
L27 0 SEA ABB-ON L24 AND L25 AND L26  
L28 2304 SEA ABB-ON GHRELIN  
L29 0 SEA ABB-ON PEPTIDE HORMONES/CT(L)AA/CT  
L30 2202 SEA ABB-ON PEPTIDE HORMONES/CT  
L31 96078 SEA ABB-ON PEPTIDES/CT  
L32 2754 SEA ABB-ON CACHEXIA/CT  
L33 553 SEA ABB-ON WASTING SYNDROME/CT  
L34 34 SEA ABB-ON L28 AND L30 OR L31 AND (L32 OR L33)  
D TRIAL 1-5  
L35 8287 SEA ABB-ON EATING/CT(L)DE/CT  
L36 4131 SEA ABB-ON APPETITE/CT  
L37 106 SEA ABB-ON L30 AND PY<2002

FILE 'STNGUIDE' ENTERED AT 14:15:03 ON 20 SEP 2007

FILE 'MEDLINE' ENTERED AT 14:19:47 ON 20 SEP 2007

D PY 106  
L38 98 SEA ABB-ON L28 AND L37  
L39 526 SEA ABB-ON L30(L) (AD OR PD OR TU OR PK)/CT  
L40 124 SEA ABB-ON L39 AND (L32 OR L33 OR L35 OR L36)  
L41 121 SEA ABB-ON L39 AND (L32 OR L33 OR L35 OR L36) AND L28  
L42 13 SEA ABB-ON L39 AND L32 AND L28  
L43 9 SEA ABB-ON (L24 OR L25 OR L26) AND L28  
D TRIAL 1-9  
L44 351 SEA ABB-ON L39/MAJ  
L45 318 SEA ABB-ON L44 AND L28  
L46 1 SEA ABB-ON L33 AND L45  
L47 66 SEA ABB-ON L35 AND L45  
L48 20 SEA ABB-ON L36 AND L45  
L49 1 SEA ABB-ON L28 AND L30 AND L33  
L50 748646 SEA ABB-ON NEOPLASMS-NT/CT(L)TH./CT  
L51 1 SEA ABB-ON (L35 OR L36) AND L45 AND L50  
L52 725074 SEA ABB-ON ANALOG? OR SECRETAGOG? OR DERIVAT?  
L53 19 SEA ABB-ON L28(W) LIKE  
L54 1 SEA ABB-ON L53 AND (L32 OR L33 OR L35 OR L36)  
L55 642 SEA ABB-ON L28 AND L30 AND L52  
L56 47 SEA ABB-ON L55 AND L39 AND (L32 OR L33 OR L35 OR L36)  
D KWIC 1-3  
L57 195 SEA ABB-ON L28(SA)L52  
L58 16 SEA ABB-ON L30 AND L57 AND (L32 OR L33 OR L35 OR L36)  
D TRIAL 1-16  
D QUE

L59 6 SEA ABB-ON L28 (1A)L52 AND L30 AND (L32 OR L33 OR L35 OR L36)

FILE 'EMBASE' ENTERED AT 14:32:16 ON 20 SEP 2007

E GHRELIN/CT  
E E3+ALL  
L60 2434 SEA ABB-ON GHRELIN/CT  
L61 7 SEA ABB-ON GHRELIN DERIVATIVE/CT  
E GHRELIN DERIVATIVE/CT  
L62 410 SEA ABB-ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
L63 638 SEA ABB-ON HANSEN C?/AU  
L64 259 SEA ABB-ON COPENHAGEN H?/AU OR NILSSON H?/AU  
L65 8 SEA ABB-ON (L62 OR L63 OR L64) AND (L60 OR L61)  
D TRIAL L61 1-7  
E CACHEXIA/CT  
E E3+ALL  
E CANCER CACH/CT

L66 14 SEA ABB-ON CANCER CACHEXIA/CT OR CANCER CACHEXIA SYNDROME/CT  
L67 3660 SEA ABB-ON CACHEXIA/CT  
L68 109 SEA ABB-ON L60 AND (L66 OR L67)  
D TRIAL 1-5

L69 459 SEA ABB-ON L60 (L) (AD OR DT OR PK OR DO OR PD) /CT  
L70 3 SEA ABB-ON L66 AND L60  
L71 721 SEA ABB-ON L67 (L) (DT OR PC) /CT  
L72 42 SEA ABB-ON L69 AND L71  
L73 8 SEA ABB-ON L69/MAJ AND L71/MAJ

FILE 'WPIX' ENTERED AT 14:37:23 ON 20 SEP 2007

L74 191 SEA ABB-ON HOLST LANGE B?/AU OR LANGE B?/AU OR HOLST B?/AU  
L75 453 SEA ABB-ON HANSEN C?/AU  
L76 157 SEA ABB-ON COPENHAGEN H?/AU OR NILSSON H?/AU  
L77 1 SEA ABB-ON L74 AND L75 AND L76  
D TRIAL

FILE 'STNGUIDE' ENTERED AT 14:37:58 ON 20 SEP 2007

FILE 'LWPI' ENTERED AT 14:39:45 ON 20 SEP 2007

E B04-B04D5+ALL/MC  
E B04-C01+ALL/MC  
E B04-H06+ALL/MC  
E B04-L04+ALL/MC  
E B11-C08+ALL/MC  
E B12-K04A+ALL/MC E B12-M04+ALL/MC  
E B14-E11B+ALL/MC  
E B14-H01+ALL/MC  
E B14-L01+ALL/MC  
E S03-E14A1+ALL/MC  
E S03-E14H1+ALL/MC

FILE 'STNGUIDE' ENTERED AT 14:39:57 ON 20 SEP 2007

FILE 'LWPI' ENTERED AT 14:40:51 ON 20 SEP 2007

E B12-K04A+ALL/MC  
E B12-M04+ALL/MC

FILE 'STNGUIDE' ENTERED AT 14:40:54 ON 20 SEP 2007

FILE 'WPIX' ENTERED AT 14:43:38 ON 20 SEP 2007  
94984 SEA ABB-ON (B14-H01+NT/MC OR C14-H01+NT/MC OR B12-G07/MC OR C12-G07/MC)

L79 3107 SEA ABB-ON CACHEXIA/BI, ABEX OR CACHECTIC?/BI, ABEX

L80 570 SEA ABB-ON B14-E11B/MC OR C14-E11B/MC  
 L81 212 SEA ABB-ON GHRELIN/BI, ABEX  
 L82 542701 SEA ABB-ON ANALOG?/BI, ABEX OR SECRETAGOG?/BI, ABEX OR DERIVATI?  
 /BI, ABEX  
 L83 25 SEA ABB-ON (L79 OR L80) AND L81  
 L84 23 SEA ABB-ON L81(IA) L82  
 L85 10 SEA ABB-ON L84 AND (L79 OR L80)  
 L86 10 SEA ABB-ON (L74 OR L75 OR L76) AND L81  
 L87 8 SEA ABB-ON (L74 OR L75 OR L76) AND (L84 OR (L81 AND (L79 OR L80)))  
 L88 8 SEA ABB-ON (L87 OR L77)  
 L89 3 SEA ABB-ON L85 AND L88  
  
 FILE 'STNGUIDE' ENTERED AT 14:46:28 ON 20 SEP 2007  
 FILE 'CAPLUS' ENTERED AT 14:49:01 ON 20 SEP 2007  
 D QUE L22  
 FILE 'MEDLINE' ENTERED AT 14:49:01 ON 20 SEP 2007  
 D QUE L43  
 FILE 'EMBASE' ENTERED AT 14:49:02 ON 20 SEP 2007  
 D QUE L65  
 FILE 'WPIX' ENTERED AT 14:49:02 ON 20 SEP 2007  
 D QUE L88  
 FILE 'MEDLINE, CAPLUS, WPIX, EMBASE' ENTERED AT 14:49:03 ON 20 SEP 2007  
 18 DUP REM L43 L22 L88 L65 (12 DUPLICATES REMOVED)  
 ANSWERS '1-9' FROM FILE MEDLINE  
 ANSWERS '10-14' FROM FILE CAPLUS  
 ANSWERS '15-17' FROM FILE WPIX  
 ANSWER '18' FROM FILE EMBASE  
 D IALL 1-9  
 D IBIB AB HITIND 10-14  
 D IALL ABEQ TECH 15-17  
 D IALL 18  
  
 FILE 'STNGUIDE' ENTERED AT 14:49:41 ON 20 SEP 2007  
 FILE 'CAPLUS' ENTERED AT 14:50:53 ON 20 SEP 2007  
 D QUE L20  
 30 SEA ABB-ON L20 NOT L22  
  
 FILE 'MEDLINE' ENTERED AT 14:50:54 ON 20 SEP 2007  
 D QUE L42  
 D QUE L49  
 D QUE L51  
 D QUE L54  
 D QUE L59  
 21 SEA ABB-ON (L42 OR L49 OR L51 OR L54 OR L59) NOT L43  
  
 FILE 'EMBASE' ENTERED AT 14:50:56 ON 20 SEP 2007  
 D QUE L61  
 D QUE L70  
 D QUE L73  
 0 SEA ABB-ON L61, L70, 73 NOT L65  
  
 FILE 'WPIX' ENTERED AT 14:50:58 ON 20 SEP 2007  
 D QUE L85

L94 7 SEA ABB-ON L85 NOT L88  
 FILE 'CAPLUS' ENTERED AT 14:52:05 ON 20 SEP 2007  
 D QUE L20  
 30 SEA ABB-ON L20 NOT L22  
  
 FILE 'MEDLINE' ENTERED AT 14:52:07 ON 20 SEP 2007  
 D QUE L42  
 D QUE L49  
 D QUE L51  
 D QUE L54  
 D QUE L59  
 21 SEA ABB-ON (L42 OR L49 OR L51 OR L54 OR L59) NOT L43  
  
 FILE 'EMBASE' ENTERED AT 14:52:09 ON 20 SEP 2007  
 D QUE L61  
 D QUE L70  
 D QUE L73  
 17 SEA ABB-ON (L61 OR L70 OR L73) NOT L65  
  
 FILE 'WPIX' ENTERED AT 14:52:10 ON 20 SEP 2007  
 D QUE L85  
 7 SEA ABB-ON L85 NOT L88  
  
 FILE 'STNGUIDE' ENTERED AT 14:52:22 ON 20 SEP 2007  
 FILE 'MEDLINE, CAPLUS, WPIX, EMBASE' ENTERED AT 14:52:46 ON 20 SEP 2007  
 66 DUP REM L96 L95 L98 L97 (9 DUPLICATES REMOVED)  
 ANSWERS '1-21' FROM FILE MEDLINE  
 ANSWERS '22-51' FROM FILE CAPLUS  
 ANSWERS '52-55' FROM FILE WPIX  
 ANSWERS '56-66' FROM FILE EMBASE  
 D IALL 1-21  
 D IBIB AB HITIND 22-51  
 D IALL ABEQ TECH 52-55  
 D IALL 56-66  
  
 FILE 'HOME' ENTERED AT 14:53:27 ON 20 SEP 2007

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